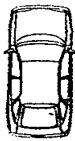


ASSIGNMENTSurveyor: Steve

DOI: _____

Date / Time : 10/08/2022

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : XE 1181TClaim No. : 22/22/22/VC05/026120

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

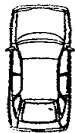
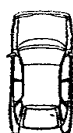
Excess Sec II :S\$ _____ D.O.A : 05/08/2022 12:00Place of Accident : TREVOSE CRESCENT

Is driver the owner? (YES / NO) Nature of Accident : _____

If NO, Driver Name / Age : _____

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : _____ (V/L: YES / NO)

Insured Liability : % **Final ? Yes / No**SNB 4732TINSRS:
WSP: BORNEO
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SNB 4732T - X	XE 1181T - X	STAGE	DATE / PIC
			Non-Reporting ltr (1st):	
			Non-Reporting ltr (2nd):	
			Non-Reporting ltr (Final):	
			Notification ltr (if non-pickup):	
			Call OI:	
			After call ltr to OI:	
			Documentation Check List:	Handler Typist
			Notification ltr (if non-pickup)	☐ ☐
			After call ltr to OI:	☐ ☐
			Authorisation To Act:	☐ ☐
			Release Voucher:	☐ ☐
			Final Repair Bill:	☐ ☐
			Car Rental Invoice:	☐ ☐
			Towing Invoice	☐ ☐
			LTA / GIA :	☐ ☐
			Medical Bill:	☐ ☐
			PIR:	☐ ☐
			Mandate/Reject Instruction:	☐ ☐
			LOD	☐ ☐
			Payment Breakdown Form:	☐ ☐
			Post-Repair Photos:	☐ ☐
			Others:	☐ ☐
PRELIMINARY ADVICE	Date/Time: _____	Sent By: _____		
FINALIZATION	Date/Time: _____	Confirm with: _____	Confirm by: _____	
Repair Cost: <u>P/P</u>	S\$ <u>2,639.19</u> (<u>3</u> days) Reduction: <u>20</u> %	Email ☐ Call ☐		
FINAL SETTLEMENT	Date/Time: <u>01/02/2023</u> Confirm with <u>ANGELA</u>	Email ☒ Call ☐		
Final Liability:	% <u>100</u> (Agreed / Assessed) BOLA S/N No. : <u>NIL</u>	If NO or B 28, Ass. Lia :		
Repair Cost: <u>w/GST</u>	S\$ <u>2,823.93</u>			
Loss of Rental (LOR):	S\$ _____ (_____ days)			
Loss of Use (LOU):	S\$ <u>240.00</u> (\$ <u>80</u> x <u>3</u> days)			
Loss of Income (LOI):	S\$ _____ (\$ _____ x _____ days)			
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]				
GIA/LTA Search	S\$ <u>2.00</u>			
Medical:	S\$ <u>2,167.35</u> <u>Helper - Guido Darlyn De Luna</u>	1) Claim status: Normal/ Reject/Private Settle		
Disbursement:	S\$ _____ (e.g. Tow/ Independent)	2) Report Format: <u>TP</u>		
Legal Cost	S\$ _____	3) Survey fee: <u>\$400.00</u>		
Total:	S\$ <u>5,233.28</u>	Global Sum S\$:		
FINAL PAYMENT	Date/Time: _____	Confirm with: _____	Email ☒ Call ☐	
Payee 1:	S\$ <u>5,233.28</u>	Name 1:	<u>Borneo Motors (S) Pte Ltd</u>	
Payee 2: (Strike if N.A.)	S\$ _____	Name 2:		
Payee 3: (Strike if N.A.)	S\$ _____	Name 3:		