

ASSIGNMENT

Surveyor:

STEVE

DOI:

11/08/2022

Date / Time :

11/08/2022

Registered in Merimen:

13/08/2022**Pre-assign / CCU / FTE**Insured Vehicle No. : PC 6489D

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 01.08.2022 14:20

Place of Accident : _____

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

If NO, Driver Name / Age :

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

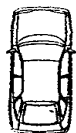
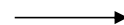
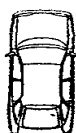
Driver Tel No. :

(V/L: YES / NO)

Insured Liability :

%

Final ? Yes / No

PC 7667APC 6489DSDN 8663MINSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS: OIINSRS:
WSP: PREMIUM
Tel :
Liability :
RMKS: TPINSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			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>2,876.50</u> (<u>4</u> days)	Reduction: <u>80</u> %	Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: <u>21/04/2023</u>	Confirm with <u>Siti</u>	Email ☒	Call ☐
Final Liability:	% <u>100</u> (Agreed / Assessed)	BOLA S/N No. : <u>28</u>	If NO or B 28, Ass. Lia : <u>0</u>	
Repair Cost: <u>8% GST</u>	S\$ <u>3,106.62</u>			
Loss of Rental (LOR):	S\$ (_____ days)			
Loss of Use (LOU):	S\$ <u>200.00</u> (\$ <u>50</u> x <u>4</u> days)			
Loss of Income (LOI):	S\$ (\$ _____ x _____ days)			
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]				
GIA/LTA Search	S\$			
Medical:	S\$	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>\$500.00</u>		
Total:	S\$ <u>3,306.62</u>	Global Sum S\$:		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒	Call ☐
Payee 1:	S\$ <u>3,306.62</u>	Name 1:	<u>Premium Automobiles Pte Ltd</u>	
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		