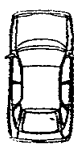


ASSIGNMENTSurveyor: **MARCUS**

DOI: _____

Date / Time : **23.09.2022**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **SHC 5062C**Claim No. : **S2M04BDJ**Name of Insured : **TRANS-CAB SERVICES PTE LTD**Policy No. : **P2459880**

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **18/09/2022 23:45**Place of Accident : **PASIR RIS DR 1 AND ELIAS ROAD JUNCTION**

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**SMU 9407L**INSRS:
WSP: **FASTECH**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SMU 9407L - Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date	SHC 5062C - Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date	Page Created By	DATE / PIC
	CC3/AIG2100871/Eqd3e2 10/02/2021 SMU 9407L 18/01/2021 11/02/2021 NVT	CC3/ASM19015218/Kga3s2 18/11/2019 SHC 5062C SJP 3785X 24/08/2019 18/11/2019 NVT	Non-Reporting ltr (1st):	
	CC3/III19006374/Kga3q2 06/02/2020 SHC 5062C SHC 8745X 06/04/2019 06/02/2020 NVT	CC3/III19006374/Kga3q2 06/02/2020 SHC 5062C SHC 8745X 06/04/2019 06/02/2020 NVT	Non-Reporting ltr (2nd):	
	CS3/ASM22008886/Rqy3 09/09/2022 SMW 847Z SHC 5062C 07/09/2022 RAP	CS3/ASM22008886/Rqy3 09/09/2022 SMW 847Z SHC 5062C 07/09/2022 RAP	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: L/SUM	S\$ 30,000.00 (25 days) Reduction: 62 %		Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 08/12/2022 Confirm with JinEe		Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL		If NO or B 28, Ass. Lia :	
Repair Cost: w/GST	S\$ 32,100.00			
Loss of Rental (LOR):	S\$ 2,800.00 (28 days) X \$100			
Loss of Use (LOU):	S\$ (\$ x 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\$			
Disbursement:	S\$ 70.00 (e.g. Tow/ independent)		1) Claim status: Normal/Reject/Prints/Settle	
Legal Cost	S\$		2) Report Format: TP	
Total:	S\$ 34,970.00 Global Sum S\$:		3) Survey fee: \$350.00	
FINAL PAYMENT	Date/Time: _____	Confirm with: _____	Email ☒ Call ☐	
Payee 1:	S\$ 34,970.00 Name 1: Fastech Auto Pte Ltd			
Payee 2: (Strike if N.A.)	S\$ Name 2:			
Payee 3: (Strike if N.A.)	S\$ Name 3:			