

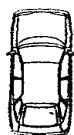
ASSIGNMENT

Surveyor: _____ DOI: _____ Date / Time : **10.10.2022**
Registered in Merimen: _____

Pre-assign / CCU / FTE

Insured Vehicle No. : **SHA 9181B** Claim No. : **S2M04CF0**
Name of Insured : **CITYCAB PTE LTD** Policy No. : **P2465703**
Insured Tel No. : _____ HP: _____ Make / Model : **Hyundai I40**
Excess Sec II : \$ _____ D.O.A : **06/10/2022 07:10** Place of Accident : **Simei Street 1, Singapore**
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**

SND 2016E

INSRS: **MY CAR CONSULTANT PTE LTD**
WSP: _____
Tel : _____
Liability : _____
RMKS: _____



INSRS: _____
WSP: _____
Tel : _____
Liability : _____
RMKS: _____



INSRS: _____
WSP: _____
Tel : _____
Liability : _____
RMKS: _____



INSRS: _____
WSP: _____
Tel : _____
Liability : _____
RMKS: _____

Date/ Time	STAGE	DATE / PIC
SND 2016E - X	Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By	
SHA 9181B -	CC3/FCI18017241/Kka3q2 03/11/2020 SHD 346L SHA 9181B 18/09/2018 11/11/2020 HMK	
	CS/FCI17008703/Kybn2 07/06/2017 SKZ 3289Y SHA 9181B 03/05/2017 09/06/2017 CKL	
	CS/FCI17011871/T1vbn2 29/08/2017 SJD 2698J SHA 9181B 13/06/2017 29/08/2017 CKL	
	CS/FCI18017446/Kqd3n2 16/11/2018 SJS 5956R SHA 9181B 24/09/2018 19/11/2018 NVT	
	NA/INC11004175/w1 07/03/2011 SIM YUXIN SBX 6167M SHA 9181B 04/03/2011 09/03/2011 LCH	
	NA/INC20007541/z4 21/07/2020 TAN CHYE CHAY SJY 7124E SHA 9181B 18/07/2020 23/07/2020 KZ	
	NA/MSG18008538/r3 10/05/2018 MOHAMED ABDUL RAHIM BIN OSMAN SKH 9358L SHA 9181B	
	Call OI: 10/05/2018 16/05/2018 RBW	
	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:	☐ ☐
PRELIMINARY ADVICE Date/Time: _____ Sent By: _____	Post-Repair Photos:	☐ ☐
	Others:	☐ ☐
FINALIZATION Date/Time: _____ Confirm with: _____ Confirm by: _____		
Repair Cost: L/SUM S\$ 1,200.00 (3 days) Reduction: 84 % Email ☐ Call ☐		
FINAL SETTLEMENT Date/Time: 17/03/2023 Confirm with: JACKSON Email ☒ Call ☐		
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27 If NO or B 28, Ass. Lia :		
Repair Cost: 8% GST S\$ 1,296.00		
Loss of Rental (LOR): S\$ _____ (_____ days)		
Loss of Use (LOU): S\$ 180.00 (\$ 60 x 3 days)		
Loss of Income (LOI): S\$ _____ (\$ _____ x _____ days)		
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search S\$ 57.75		
Medical: S\$ _____		
Disbursement: S\$ _____ (e.g. Tow/ Independent)		
Legal Cost S\$ _____		
Total: S\$ 1,533.75 Global Sum S\$:		
FINAL PAYMENT Date/Time: _____ Confirm with: _____ Email ☒ Call ☐		
Payee 1: S\$ 1,533.75 Name 1: My Car Consultant Pte Ltd		
Payee 2: (Strike if N.A.) S\$ _____ Name 2: _____		
Payee 3: (Strike if N.A.) S\$ _____ Name 3: _____		

1) Claim status: Normal/~~Reject/Private Settle~~
2) Report Format: **TP**
3) Survey fee: **\$350.00**