

ASSIGNMENTSurveyor: **RASUL**DOI: **12/10/2022**Date / Time : **12/10/2022**Registered in Merimen: **15/10/2022****Pre-assign / CCU / FTE**Insured Vehicle No. : **SMP 1898G**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **11/10/2022 15:40**

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****SHC 4958A**INSRS:
WSP: **STRIDES**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SHC 4958A - X	SMP 1898G - 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:	L/SUM S\$ 2,900.00 (5 days) Reduction: 78 %		Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: 27/03/2023 Confirm with Lee Gek		Email ☒	Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL		If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 2,900.00			
Loss of Rental (LOR):	S\$ 616.32 (6 days) X \$102.72			
Loss of Use (LOU):	S\$ _____ (\$ _____ x _____ days)			
Loss of Income (LOI):	S\$ 300.00 (\$ 50 x 6 days)			
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☒	[Tick only one]			
GIA/LTA Search	S\$ 2.00			
Medical:	S\$ _____		1) Claim status: Normal/ Reject/Private Settle	
Disbursement:	S\$ _____ (e.g. Tow/ Independent)		2) Report Format: TP	
Legal Cost	S\$ _____		3) Survey fee: \$320.00	
Total:	S\$ 3,818.32	Global Sum S\$: 3,810.00		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒	Call ☐
Payee 1:	S\$ 3,810.00	Name 1: Strides Taxi Pte Ltd		
Payee 2: (Strike if N.A.)	S\$ _____	Name 2:		
Payee 3: (Strike if N.A.)	S\$ _____	Name 3:		