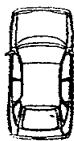


ASSIGNMENTSurveyor: ADRIANDOI: 14/10/2022Date / Time : 14/10/2022Registered in Merimen: 15/10/2022**Pre-assign / CCU / FTE**Insured Vehicle No. : SMG 2449K

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 14/10/2022 08:05

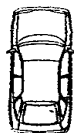
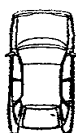
Place of Accident : _____

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**SJQ 1035KINSRS:
WSP: HD PERFECT
Tel : AUTOWORK
Liability : PTE LTD
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SJQ 1035K - X		SMG 2449K - 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:	☐ ☐
PRELIMINARY ADVICE	Date/Time:	Sent By:			Post-Repair Photos:	☐ ☐
					Others:	☐ ☐
FINALIZATION	Date/Time:	Confirm with:			Confirm by:	
Repair Cost:	L/Sum S\$ 15,300.00	(15 days)	Reduction:	55 %	Email	☐ Call ☐
FINAL SETTLEMENT	Date/Time: 17/04/2023	Confirm with Irene			Email ☒	Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 28 (Ass.100%)			If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 15,300.00					
Loss of Rental (LOR):	S\$ 1,800.00	(15 days)	@ \$120			
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\$ 7.45					
Medical:	S\$					
Disbursement:	S\$ 80.00	(e.g. Tow/ Independent)			1) Claim status: Normal/Reject/Dispute/Settle	
Legal Cost	S\$				2) Report Format: TP	
					3) Survey fee: \$320	
Total:	S\$ 17,187.45	Global Sum S\$: 17,000.00				
FINAL PAYMENT	Date/Time:	Confirm with:			Email ☒	Call ☐
Payee 1:	S\$ 17,000.00	Name 1:	HD PERFECT AUTOWORK PTE LTD			
Payee 2: (Strike if N.A.)	S\$	Name 2:				
Payee 3: (Strike if N.A.)	S\$	Name 3:				