

ASSIGNMENT

Surveyor: Adrian DOI: 26/10/2022 Date / Time : 26.10.2022
Registered in Merimen:

Pre-assign / CCU / FTE

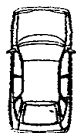
Insured Vehicle No.	:	<u>SHC 5781K</u>	Claim No.	:	<u>S2M04DFE</u>
Name of Insured	:	<u>TRANS-CAB SERVICES PTE LTD</u>	Policy No.	:	<u>P2459880</u>
Insured Tel No.	:	_____ HP: _____	Make / Model	:	<u>Toyota PRIUS 5 DR HATCHBACK (AUTO)</u>
Excess Sec II :S\$		D.O.A : 24/10/2022 20:30	Place of Accident :		<u>JUNCTION OF NORTH BRIDGE ROAD TURNING LEFT INTO BRASS BASAH ROAD</u>

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

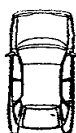
If NO, Driver Name / Age : **AGOS SADI BIN SUHAIMI** OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SLE 1311C



INRS: AKA AUTO
WSP: PTE LTD
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			STAGE	DATE / PIC
SLE 1311C - X			Non-Reporting ltr (1st):	
SHC 5781K - Reference Entry	Date Customer Name	Vehicle No. TP Vehicle No. Accident Date Close Date Created B	Non-Reporting ltr (2nd):	
CC3/CT118004180/Khs3s2	22/07/2019	SHC 5781K SBK 3300H 28/02/2018 24/07/2019 LSP	Non-Reporting ltr (Final):	
CC3/FC115014200/K11bc2	26/04/2016	SHC 5781K GU 2081J 18/08/2015 27/04/2016 CKL	Notification ltr (if non-pickup):	
CC3/III21006023/Kbs3q2	28/07/2021	SHC 5781K SHD 2490P 15/05/2021 29/07/2021 LSL 1	Call OI:	
CC3/TMI15015751/Kibd1	28/09/2015	SHC 5781K GW 18X 15/09/2015 30/09/2015 CCY	After call ltr to OI:	
CC4/AXA16022147/Kha3q2	24/07/2018	SGY 4852S SHC 5781K 17/11/2016 27/07/2018 HMK	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\$ 1,850.00	(4 days) Reduction: 68 %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time:13/01/2023	Confirm with AKA	Email ☒ Call ☐	
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 1,850.00			
Loss of Rental (LOR):	S\$ 360.00	(4 days) X \$90		
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\$		1) Claim status: Normal/Reject/Private Settle	
Disbursement:	S\$	(e.g. Tow/ Independent)	2) Report Format: TP	
Legal Cost	S\$		3) Survey fee: \$350.00	
Total:	S\$ 2,217.45	Global Sum S\$:		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒ Call ☐	
Payee 1:	S\$ 2,217.45	Name 1: AKA AUTO PTE LTD		
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		