

ASSIGNMENT

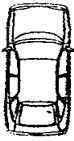
Surveyor: MARCUS

DOI: 31/10/2022

Date / Time : 31/10/2022

Registered in Merimen: 31.10.2022

Pre-assign / CCU / FTE



Insured Vehicle No. : SKW 9084Y

Claim No. : _____

Name of Insured :

Policy No. :

Insured Tel No. : HP:

Make / Model :

Excess Sec II :\$S\$ D.O.A: 29-10-22

Place of Accident : _____

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

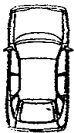
If **NO**, Driver Name / Age :

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : (V/L: YES / NO)

Insured Liability :	%	Final ? Yes / No
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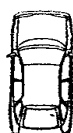
SLK 2477U



INRS:
WSP: **FASTECH**
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time										
SLK 2477U - Reference	Entry Date	Customer Name	Vehicle No.	TP Vehicle No.	Accident Date	Close Date	Created By			
NS/INC17011391/M1rbe2	02/07/2017	SHA 2487R	SLK 2477U	09/06/2017	06/07/2017	CKL	NS/INC17011391			
SKW 9084Y - X							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\$ 10,500.00	(3 days)	Reduction: 59	%	Email ☐	Call ☐				
FINAL SETTLEMENT	Date/Time: 15/02/2023	Confirm with Size Lin				Email ☒	Call ☐			
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : NIL				If NO or B 28, Ass. Lia :				
Repair Cost: 7% GST	S\$ 11,235.00									
Loss of Rental (LOR):	S\$ 300.00	(3 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\$ 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\$ 11,537.00	Global Sum S\$:								
FINAL PAYMENT	Date/Time:	Confirm with:				Email ☒	Call ☐			
Payee 1:	S\$ 11,537.00	Name 1:	Fastech Auto Pte Ltd							
Payee 2: (Strike if N.A.)	S\$	Name 2:								
Payee 3: (Strike if N.A.)	S\$	Name 3:								