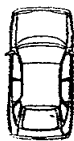


ASSIGNMENTSurveyor: **MARCUS**DOI: **01.11.2022**Date / Time : **01.11.2022**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **PC 8776L**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **31/10/2022 08:35**Place of Accident : **MARINE PARADE ROAD**

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

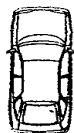
If **NO**, Driver Name / Age : _____

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

Driver Tel No. : _____

(V/L: YES / NO)

Insured Liability : _____ %

Final ? Yes / No**GBG 8920G**INSRS:
WSP: **FASTECH**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	Reference Entry	Date	Customer Name	Vehicle No.	TP Vehicle No.	Accident Date	Close Date	Station	Created By	DATE / PIC
GBG 8920G	NA/CTI22010839/r3	01/11/2022	MUHAMAD SUPARMAN BIN AMAN	PC 8776L	GBG 8920G	01/11/2022	RBW	Non-Reporting ltr (1st):		
PC 8776L	NA/CTI22010839/r3	01/11/2022	MUHAMAD SUPARMAN BIN AMAN	PC 8776L	GBG 8920G	01/11/2022	RBW	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\$ 6,200.00	(5 days)	Reduction: 61	%				Email ☒	Call ☐	
FINAL SETTLEMENT	Date/Time: 23/06/2023		Confirm with: JASON					Email ☒	Call ☐	
Final Liability:	% 100	(Agreed / Assessed)	BOLA S/N No. : 27					If NO or B 28, Ass. Lia :		
Repair Cost: 7%GST	S\$ 6,634.00									
Loss of Rental (LOR):	S\$ ()	days)								
Loss of Use (LOU):	S\$ 400.00	(\$ 80 x 5 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 Settlement		
Disbursement:	S\$ (e.g. Tow/ Independent)							2) Report Format: TP		
Legal Cost	S\$							3) Survey fee: \$400.00		
Total:	S\$ 7,036.00		Global Sum S\$:							
FINAL PAYMENT	Date/Time:		Confirm with:					Email ☐	Call ☐	
Payee 1:	S\$ 7,036.00		Name 1:	Fastech Auto Pte Ltd						
Payee 2: (Strike if N.A.)	S\$		Name 2:							
Payee 3: (Strike if N.A.)	S\$		Name 3:							