

ASSIGNMENT

Surveyor:

RASULDOI: **02/11/2022**Date / Time : **01.11.2022**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **SHB 4947L**Claim No. : **S2M04DTF**Name of Insured : **CITYCAB PTE LTD**Policy No. : **P2465703**

Insured Tel No. : _____ HP: _____

Make / Model : **Hyundai Ae ioniq****Excess Sec II :S\$** _____ D.O.A : **30/10/2022 23:54**Place of Accident : **ROCHOR CANAL ROAD**

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

If **NO**, Driver Name / Age : **ZAINAL ABIDIN BIN IBRAHIM**

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

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

Insured Liability : % **Final ? Yes / No****SMQ 4762P**INSRS:
WSP: **MY CAR
CONSULTANT
PTE LTD**
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 Created By	DATE / PIC
SMQ 4762P	CS/TMI22007174/Tcy3q2 26/09/2022 SHC 264U SMQ 4762P 26/07/2022 26/09/2022 NMY	
SHB 4947L	CC3/AIG09029032/Cq1n 07/04/2010 SHB 4947L GBB 3968D 28/12/2009 09/04/2010 CBN CS/FC16008549/Uqh3c2 27/05/2016 SJQ 6222D SHB 4947L 08/05/2016 02/06/2016 CCY CS/ASM22007050/Tcy3m4 17/08/2022 SJJ 3233D SHB 4947L 20/07/2022 18/08/2022 RAP	
	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\$ 7,150.00 (7 days) Reduction: 70 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 11/04/2023 Confirm with JACKSON	Email ☒ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: 8% GST	S\$ 7,722.00	
Loss of Rental (LOR):	S\$ _____ (_____ days)	
Loss of Use (LOU):	S\$ 800.00 (\$ 100 x 8 days)	
Loss of Income (LOI):	S\$ _____ (\$ _____ x _____ days)	
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	S\$ 38.45	
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\$ 8,560.45 Global Sum S\$: 8,550.00	
FINAL PAYMENT	Date/Time: _____ Confirm with: _____ Email ☒ Call ☐	
Payee 1:	S\$ 8,550.00 Name 1: My Car Consultant Pte Ltd	
Payee 2: (Strike if N.A.)	S\$ _____ Name 2: _____	
Payee 3: (Strike if N.A.)	S\$ _____ Name 3: _____	