

ASSIGNMENT

Surveyor: _____ DOI: _____ Date / Time : 07/11/2022
Registered in Merimen: _____

Pre-assign / CCU / FTE[illegible]

SMK 4472H

	INSRS: WSP: RYDER Tel : AUTO Liability : RMKS:		INSRS: WSP: Tel : Liability : RMKS:		INSRS: WSP: Tel : Liability : RMKS:		INSRS: WSP: Tel : Liability : RMKS:
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Date/ Time				STAGE		DATE / PIC	
SMK 4472H - X				Accident Date		Close Date Created By	
GBE 7968L - Reference Entry Date Customer Name Vehicle No. TP Vehicle No. A				05/2016 07/08/2018 LSP			
CC6/AIG16009501/M1pb3q2 03/08/2018 GBE 5018S GBE 7968L 1				1242S 11/06/2019 14/06/2019 KSG			
NA/INC19010296/k4 11/06/2019 SEKAR GANESAN GBE 7968L FN				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:	
						☐	
						☐	
FINALIZATION		Date/Time:		Confirm with:		Confirm by:	
Repair Cost:		S\$		(days) Reduction: %		Email ☐ Call ☐	
FINAL SETTLEMENT		Date/Time:		Confirm with		Email ☐ Call ☐	
Final Liability:		%		(Agreed / Assessed) BOLA S/N No. :		If NO or B 28, Ass. Lia :	
Repair Cost:		S\$					
Loss of Rental (LOR):		S\$		(days)			
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\$					
Medical:		S\$				1) Claim status: Normal/Reject/Private Settle	
Disbursement:		S\$		(e.g. Tow/ Independent)		2) Report Format:	
Legal Cost		S\$				3) Survey fee:	
Total:		S\$		Global Sum S\$:			
FINAL PAYMENT		Date/Time:		Confirm with:		Email ☐ Call ☐	
Payee 1:		S\$		Name 1:			
Payee 2: (Strike if N.A.)		S\$		Name 2:			
Payee 3: (Strike if N.A.)		S\$		Name 3:			