

ASSIGNMENTSurveyor: **MARCUS**DOI: **08/11/2022**Date / Time : **08/11/2022**Registered in Merimen: **09/11/2022****Pre-assign / CCU / FTE**Insured Vehicle No. : **SMM 9886D**

Claim No. : _____

Name of Insured : **RICARDO LEE MING SHU**Policy No. : **SP2002790578-01**

Insured Tel No. : _____ HP: _____

Make / Model : **Subaru Forester**Excess Sec II :\$ _____ D.O.A : **06/11/2022 10:36**Place of Accident : **PIE (CHANGI) NEAR SIMEI EXIT**

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****SNH 1420G****SMM 9886D****SLC 4596M**INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:**OI**INSRS:
WSP:
Tel :
Liability :
RMKS:**Zoom Autowerks Pte Ltd TP**INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	Reference Entry	Date	Customer Name	Vehicle No.	TP Vehicle No.	Accident Date	Close Date	Created By	STAGE	DATE / PIC
SLC 4596M -	CS/CT19013566/Avd3n2	16/09/2019	SKU 8144A	SLC 4596M	28/07/2019	17/09/2019	NVT	NA/CT19013306/h4	29/07/2019	MR KUA WEIZHONG , GIBSON (KE WEI ZHONG)
SMM 9886D - X										
									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:	
									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\$ 2,000.00	(4 days)	Reduction: 83 %		Email ☐		Call ☐			
FINAL SETTLEMENT	Date/Time: 11/01/2023	Confirm with Elin							Email ☒ Call ☐	
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 28							If NO or B 28, Ass. Lia : 0	
Repair Cost:	S\$ 2,000.00									
Loss of Rental (LOR):	S\$ (days)									
Loss of Use (LOU):	S\$ 200.00 (\$ 50 x 4 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\$									
Disbursement:	S\$ (e.g. Tow/ Independent)									
Legal Cost	S\$									
Total:	S\$ 2,200.00	Global Sum S\$:								
FINAL PAYMENT	Date/Time:	Confirm with:							Email ☐ Call ☐	
Payee 1:	S\$ 2,200.00	Name 1:	Zoom Autowerks Pte Ltd							
Payee 2: (Strike if N.A.)	S\$	Name 2:								
Payee 3: (Strike if N.A.)	S\$	Name 3:								