

ASSIGNMENTSurveyor: **MARCUS**DOI: **11/11/2022**Date / Time : **11/11/2022**

Registered in Merimen: _____

Pre-assign / CCU / FTE

Insured Vehicle No. : **SCW 260J**
 Name of Insured : **GOH WEE LENG ANTHONY**
 Insured Tel No. : _____ HP: _____
Excess Sec II : \$ _____ D.O.A : **11/11/2022**

Claim No. : **S2M04EO5**
 Policy No. : **GA318316**
 Make / Model : _____
 Place of Accident : _____

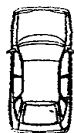
Is driver the owner? (YES / NO) Nature of Accident : _____

If NO, Driver Name / Age :

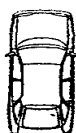
Driver Tel No. :

(V/L: YES / NO)

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

Insured Liability : % **Final ? Yes / No****PD 546G**

INSRS:
WSP: **FASTECH**
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
PD 546G - X			
SCW 260J - Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date		Non-Reporting ltr (1st):	
CS/AXA14009586/Rtm3k3 24/09/2014 SCW 260J 15/05/2014 25/09/2014 BPL		Non-Reporting ltr (2nd):	
CS3/AXA14009296/Rvm3u2-1 21/08/2014 SJZ 8009T SCW 260J 15/05/2014 27/08/2014 BPL		Non-Reporting ltr (Final):	
CS3/AXA14009296/Ym3u2 26/05/2014 SJZ 8009T SCW 260J 15/05/2014 28/05/2014 BPL		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: P/P	S\$ 4,524.92 (3 days) Reduction: 71 %	Email ☐	Call ☐
FINAL SETTLEMENT Date/Time: 20/12/2022 Confirm with SZELIN		Email ☒	Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 22	If NO or B 28, Ass. Lia :	
Repair Cost: w/GST	S\$ 4,841.66		
Loss of Rental (LOR):	S\$ (_____ days)		
Loss of Use (LOU):	S\$ 210.00 (\$ 70 x 3 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: \$350.00	
Total:	S\$ 5,053.66 Global Sum S\$:		
FINAL PAYMENT Date/Time: _____ Confirm with: _____ Email ☒ Call ☐			
Payee 1:	S\$ 5,053.66 Name 1: Fastech Auto Pte Ltd		
Payee 2: (Strike if N.A.)	S\$ Name 2:		
Payee 3: (Strike if N.A.)	S\$ Name 3:		