

ASSIGNMENT

Surveyor: _____

DOI: _____

Date / Time : **14-11-22**Registered in Merimen: **14-11-22****Pre-assign / CCU / FTE**Insured Vehicle No. : **YN 5075G**

Claim No. : _____

Name of Insured : **MONKEY EXPRESS LLP**Policy No. : **P000018824**

Insured Tel No. : _____ HP: _____

Make / Model : **Mitsubishi CANTER FEB21ER4SDEB (CBU)**Excess Sec II :\$ _____ D.O.A : **09/11/2022 22:30**Place of Accident : **PUNGGOL PLACE AND PUNGGOL FIELD JUNCTION**

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

If NO, Driver Name / Age : **JOSHUA S/O ISRAVEL**

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

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

Insured Liability : % **Final ? Yes / No****SJT 216X**INSRS:
WSP: **MODERN**
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	STAGE	DATE / PIC
SJT 216X	CS3/AXA12019973/Aqn-1 13/02/2013 SJT 216X SGF 9472Y 13/10/2012 22/02/2013 SSC	Non-Reporting ltr (1st):	
	CS3/AXA12019973/Cv1d 18/10/2012 SJT 216X SGF 9472Y 13/10/2012 23/10/2012 CXG	Non-Reporting ltr (2nd):	
YN 5075G	CS6/AIS22011400/y3 14/11/2022 YN 5075G 09/11/2022 NMY	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\$ 9,400.00 (12 days) Reduction: 47 %	Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: 10/05/2023 Confirm with Ms Chin	Email ☒	Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :	
Repair Cost: 8%GST	S\$ 10,152.00		
Loss of Rental (LOR):	S\$ _____ (_____ days)		
Loss of Use (LOU):	S\$ 650.00 (\$ 50 x 13 days)		
Loss of Income (LOI):	S\$ 650.00 (\$ 50 x 13 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\$ 11,454.00 Global Sum S\$: 11,200.00		
FINAL PAYMENT	Date/Time: _____ Confirm with: _____	Email ☒	Call ☐
Payee 1:	S\$ 11,200.00 Name 1: MODERN AUTOMOTIVE PTE LTD		
Payee 2: (Strike if N.A.)	S\$ _____ Name 2: _____		
Payee 3: (Strike if N.A.)	S\$ _____ Name 3: _____		