

ASSIGNMENT

Surveyor:

BRYAN

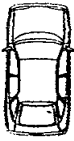
DOI:

07/12/2022

Date / Time :

05/12/2022

Registered in Merimen:

Pre-assign / CCU / FTEInsured Vehicle No. : **SLC 9325X**Claim No. : **S2M04FW2**Name of Insured : **TAN JEE JIAR ANDREW JAIR**Policy No. : **GA351195**

Insured Tel No. : _____ HP: _____

Make / Model : **Toyota WISH 1.8 CVT****Excess Sec II :S\$** _____ D.O.A : **01/12/2022 17:30**Place of Accident : **OUTSIDE 17 BEGONIA WALK**

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

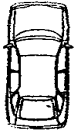
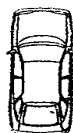
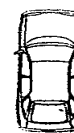
If NO, Driver Name / Age : **TAN XING LIANG**

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

Driver Tel No. : _____

(V/L: YES / NO)

Insured Liability : _____ %

Final ? Yes / No**SJD 5867T**INSRS:
WSP: **GOH LEE HWA**
Tel : **AUTOMOBILE**
Liability: **PTE LTD**
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
SJD 5867T	CC4/AXA12009134/Uec3f1 12/07/2012 SJD 5867T GX 2106G 04/05/2012 20/07/2012 TP	Non-Reporting ltr (1st):	
	NA/INC15008210/F 18/05/2015 CHAW CHONG SUI SJD 5867T SGH 9924A 18/05/2015 20/05/2015 FCF	Non-Reporting ltr (2nd):	
SLC 9325X	CS/MSG18001621/Gvd3n2 20/03/2018 SLC 9325X SKA 1537B 09/12/2017 21/03/2018 NVI	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\$ 2,600.00 (5 days) Reduction: 79 %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 02/02/2023 Confirm with Alfred	Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 22	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 2,600.00		
Loss of Rental (LOR):	S\$ 560.00 (7 days) X \$80		
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: TP	
Legal Cost	S\$	3) Survey fee: \$350.00	
Total:	S\$ 3,160.00 Global Sum S\$: 3,160.00		
FINAL PAYMENT	Date/Time: _____ Confirm with: _____	Email ☒ Call ☐	
Payee 1:	S\$ 3,160.00 Name 1: GOH LEE HWA AUTOMOBILE PTE LTD		
Payee 2: (Strike if N.A.)	S\$ Name 2:		
Payee 3: (Strike if N.A.)	S\$ Name 3:		