

ASSIGNMENTSurveyor: **ADRIAN**DOI: **29/11/2022**Date / Time : **29/11/2022**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **YN 8984M**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : S\$ _____ **D.O.A :** **24/11/2022 19:05**Place of Accident : **PAN-I COMPLEX (601 SIMS DR S.387382)**

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****SMW 8856U**INSRS: **T K Lee**
WSP: **Automotive**
Tel : **Pte Ltd**
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	Created By	DATE / PIC
SMW 8856U	CC4/FCI21012191/Upa3q2 10/12/2021 SMW 8856U SBS 6408U 30/11/2021 10/12/2021 HMK	Non-Reporting ltr (1st):	
	NA/CTI22011936/a4 28/11/2022 MANDIP SINGH YN 8984M SMW 8856U 24/11/2022 30/11/2022 AHS	Non-Reporting ltr (2nd):	
YN 8984M	NA/CTI22011936/a4 28/11/2022 MANDIP SINGH YN 8984M SMW 8856U 24/11/2022 30/11/2022 AHS	Non-Reporting ltr (Final):	
	NA/INC17008912/k4 08/05/2017 CHUA TEOW POH SFY 9449C YN 8984M 06/05/2017 18/05/2017 KSG	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:	☐ ☐
		Post-Repair Photos:	☐ ☐
		Others:	☐ ☐
PRELIMINARY ADVICE	Date/Time: _____ Sent By: _____		
FINALIZATION	Date/Time: _____ Confirm with: _____ Confirm by: _____		
Repair Cost: Part by Part	S\$ 3,595.36 (3 days) Reduction: 41 %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 21/03/2023 Confirm with: Xue Ting	Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 14	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 3,595.36		
Loss of Rental (LOR):	S\$ 400.00 (4 days) @\$100		
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\$ 7.45		
Medical:	S\$		
Disbursement:	S\$ (e.g. Tow/ Independent)		
Legal Cost	S\$		
Total:	S\$ 4,002.81 Global Sum S\$:		
FINAL PAYMENT	Date/Time: _____ Confirm with: _____ Email ☒ Call ☐		
Payee 1:	S\$ 4,002.81 Name 1: T K LEE AUTOMOTIVE PTE LTD		
Payee 2: (Strike if N.A.)	S\$ Name 2:		
Payee 3: (Strike if N.A.)	S\$ Name 3:		

 1) Claim status: Normal/Reject/Private Settle
 2) Report Format: **TP**
 3) Survey fee: **\$400**