

ASSIGNMENT

Surveyor: _____

DOI: _____

Date / Time : **10/02/2023**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **SJN 4619Y**Claim No. : **S3M04J7B**Name of Insured : **MOHAMAD SUFI'AN BIN MOHAMAD SANI**Policy No. : **GA604648**

Insured Tel No. : _____ HP: _____

Make / Model : **Honda Civic****Excess Sec II :S\$**D.O.A : **03/02/2023 20:00**Place of Accident : **585 Pasir Ris Street 53, Singapore 510585**

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**SLE 7478R**

INSRS:

WSP: **T K Lee**Tel : **Automotive Pte Ltd**

Liability :

RMKS:



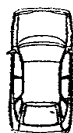
INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time			STAGE	DATE / PIC
	SLE 7478R - X	SJN 4619Y - 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:	Handler
			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\$ 4,700.00	(4 days) Reduction: 67 %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time 23/03/2023	Confirm with XUE TING	Email ☒ Call ☐	
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 22	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 4,700.00			
Loss of Rental (LOR):	S\$ 500.00	(5 days) X \$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\$			
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\$ 5,200.00	Global Sum S\$:		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒ Call ☐	
Payee 1:	S\$ 5,200.00	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:		