

ASSIGNMENTSurveyor: **MARCUS**DOI: **27.02.2023**Date / Time : **27.02.2023**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **PC 9296Z**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **27/02/2023 07:30**

Place of Accident : _____

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**SMR 5773X**INSRS:
WSP: **SPEEDWERKZ**
Tel : **PTE LTD**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	Entry Date	Customer Name	Vehicle No.	TP Vehicle No.	Accident Date	STAGE	Case Date	Created By	DATE / PIC
	NBA/TMI23002119/Y	27/02/2023 TAN KOK HENG (CHEN GUOXING)	SMR 5773X	PC 9296Z	27/02/2023	No Report	27/02/2023	RBA	
	NA/CTI22003593/m4	19/04/2022 AZIZAH BINTE TAIB	PC 9296Z	GBJ 4536T	19/04/2022	No Report	19/04/2022	SML	
	NBA/TMI23002119/Y	27/02/2023 TAN KOK HENG (CHEN GUOXING)	SMR 5773X	PC 9296Z	27/02/2023	No Report	27/02/2023	RBA	
						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\$ 3,200.00	(3 days)	Reduction: 93	%		Email ☐	Call ☐		
FINAL SETTLEMENT	Date/Time: 30/05/2023	Confirm with JULIE				Email ☒	Call ☐		
Final Liability:	% 100	(Agreed / Assessed)	BOLA S/N No. : 27			If NO or B 28, Ass. Lia :			
Repair Cost:	S\$ 3,200.00								
Loss of Rental (LOR):	S\$ (days)								
Loss of Use (LOU):	S\$ 300.00	(\$ 100 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\$ 26.75								
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: \$400.00			
Total:	S\$ 3,526.75		Global Sum S\$:	3,500.00					
FINAL PAYMENT	Date/Time:		Confirm with:			Email ☐	Call ☐		
Payee 1:	S\$ 3,500.00	Name 1:	SPEEDWERKZ PTE LTD						
Payee 2: (Strike if N.A.)	S\$	Name 2:							
Payee 3: (Strike if N.A.)	S\$	Name 3:							