

ASSIGNMENT

Surveyor: ADRIAN DOI: 12/07/2023 Date / Time : 12/07/2023 Registered in Merimen: 20/07/2023

Pre-assign / CCU / FTE



Insured Vehicle No. : SJQ 1122S Claim No. :
Name of Insured : Policy No. :
Insured Tel No. : HP: Make / Model :
Excess Sec II :\$\$ D.O.A : 10/07/2023 09:05 Place of Accident : PIE TOWARDS CITY
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

SLP 45U



INSRS: WSP: J-MART
Tel :
Liability :
RMKS:



INSRS: WSP:
Tel :
Liability :
RMKS:



INSRS: WSP:
Tel :
Liability :
RMKS:



INSRS: WSP:
Tel :
Liability :
RMKS:

Table with columns for Date/Time, Reference Entry, Customer Name, Vehicle No., TP Vehicle No., Accident Date, Close Date, Created By, and Documentation Check List (Handler, Typist). Includes sections for PRELIMINARY ADVICE, FINALIZATION, FINAL SETTLEMENT, and FINAL PAYMENT.