ccy/111/7007303/Mea392-1

15/5/2010

INS. CASE OWNER: Natalie. | ~~cc4/111/1700 7303, PIda29~~ | LKK: IDAC:

ASSIGNMENT

Surveyor: Kasu DOI: 13/4/17 Date / Time: 12/4/17 Registered in Merimen: 13/4/17

20/12/17

Pre-assign / CCU / FTE

Insured Vehicle No.:	SHB 7064U	Claim No.:	MC1170 40387
Name of Insured:	Comfort Transportation PL	Policy No.:	MOM 0016
Insured Tel No.:	6550 8708 HP:	Make / Model:	Hyundai I40
Excess Sec II :S$	D.O.A: 10/4/17	Place of Accident:	Somerset rd x Orange rd
Is driver the owner? (YES / NO)	Nature of Accident:	OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO	
If NO, Driver Name / Age: Kwan See Hong	(V/L: YES / NO)	Insured Liability: %	Final ? Yes / No
Driver Tel No.:			

SMB 3534S →

INSRS: WSP: Tel: Liability: RMKS: Tower Transit

INSRS: WSP: Tel: Liability: RMKS:

INSRS: WSP: Tel: Liability: RMKS:

INSRS: WSP: Tel: Liability: RMKS:

Date/ Time	
19/4 Syaf.	SMB3534S - SG37/111/600839/... Don 22/4/16 SHB 7064U - SG37/111/600839/...
19.04.17	REQUEST VIDEO FOOTAGE FROM (III) TO DETERMINE LIABILITY.
	- TO GET CCTV FROM OI (III).
	(a VIDEO SAVED IN - V: DRIVE / SYAP / SHA 7064U)
	- CID INSTRUCTION - TO REJECT.
17.03.17	- EMAIL TO TP TO REJECT.
3/9/17	SEEK MANDATE FOR LIABILITY.
2/9/17	MANDATE APPROVE 50% LIABILITY.

RECEIVED 3 0 JAN 2018

STAGE	DATE / PIC
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	Typist
Notification ltr (if non-pickup)	☐	☐
After call ltr to OI	☐	☐
Authorisation To Act: (NO NEED)	☐	☐
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: P/P	S$1,415.30 (2 days)	Reduction: 50 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 11/1/18	Confirm with SHARIFAH	Email ☑ Call ☐
Final Liability: 100%	% 50%	(Agreed / Assessed) BOLA S/N No.: NIL	If NO or B 28, Ass. Lia:
Repair Cost: w/GST: $1,514.26	S$ 757.13	BOTH PARTY TURNING	
Loss of Rental (LOR): -	S$	(days)	COPY SENT 30/1/18
Loss of Use (LOU): $1,050	S$ 525.00	($ 350 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$ -		
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 - $250.
Total: $ 2,564.26	S$ 1,282.13	**Global Sum S$:**	
FINAL PAYMENT	Date/Time: 11/1/18	Confirm with: SHARIFAH	Email ☑ Call ☐
Payee 1:	S$ 1,282.13	Name 1: ~~TBA~~ TOWER TRANSIT SINGAPORE PTE LTD	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	