

INS. CASE OWNER:

cc 3, CT11800 0947, K1 ja3

LKK:
IDAC:

Surveyor: Awk DOI: 15/1/18 Date / Time: 15/1/18
Registered in Merimen: _____

Pre-assign / CCU / FTE



Insured Vehicle No. : YP 772 Claim No. : _____
Name of Insured : _____ Policy No. : _____
Insured Tel No. : _____ HP: _____ Make / Model : _____
Excess Sec II :SS D.O.A: 12/01/2018 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

SH 74414 → _____ → _____ → _____



INSRS:
WSP: CDU5109ang
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	STAGE	DATE / PIC	
<u>SH 74414, cc3/wk1/202461/kjbb; b0h 28/1/18</u> <u>YP 772 - *</u>	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)	<input type="checkbox"/>	<input type="checkbox"/>
	After call ltr to OI:	<input type="checkbox"/>	<input type="checkbox"/>
	Authorisation To Act:	<input type="checkbox"/>	<input type="checkbox"/>
	Release Voucher:	<input type="checkbox"/>	<input type="checkbox"/>
	Final Repair Bill:	<input type="checkbox"/>	<input type="checkbox"/>
	Car Rental Invoice:	<input type="checkbox"/>	<input type="checkbox"/>
	Towing Invoice	<input type="checkbox"/>	<input type="checkbox"/>
	LTA / GIA :	<input type="checkbox"/>	<input type="checkbox"/>
Medical Bill:	<input type="checkbox"/>	<input type="checkbox"/>	
PIR:	<input type="checkbox"/>	<input type="checkbox"/>	
Mandate/Reject Instruction:	<input type="checkbox"/>	<input type="checkbox"/>	
LOD	<input type="checkbox"/>	<input type="checkbox"/>	
Payment Breakdown Form:	<input type="checkbox"/>	<input type="checkbox"/>	

PRELIMINARY ADVICE Date/Time: _____ Sent By: _____ Post-Repair Photos:
Others:

FINALIZATION Date/Time: _____ Confirm with: _____ Confirm by: _____
Repair Cost: S\$ _____ (_____ days) Reduction: % _____ Email Call

FINAL SETTLEMENT Date/Time: _____ Confirm with _____ Email Call
Final Liability: % (Agreed / Assessed) BOLA S/N No. : _____ If NO or B 28, Ass. Lia : _____
Repair Cost: S\$ _____
Loss of Rental (LOR): S\$ _____ (_____ days)
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\$ _____
Disbursement: S\$ _____ (e.g. Tow/ Independent)
Legal Cost S\$ _____
1) Claim status: Normal/Reject/Private Settle
2) Report Format:
3) Survey fee:

Total: S\$ _____ **Global Sum S\$:** _____

FINAL PAYMENT Date/Time: _____ Confirm with: _____ Email Call
Payee 1: S\$ _____ Name 1: _____
Payee 2: (Strike if N.A.) S\$ _____ Name 2: _____
Payee 3: (Strike if N.A.) S\$ _____ Name 3: _____

COMFORTDELGRO ENGINEERING

ComfortDelGro Engineering Pte Ltd

205 Braddell Road Singapore 579701
 Mainline + 65 6383 6280 Facsimile + 65 6280 9755
Workshops
 59 Loyang Drive Singapore 508969 24 Senoko Loop Singapore 758156
 383 Sin Ming Drive Singapore 575717 7 Sungei Kadut Way Singapore 728791
 45 Pandan Road Singapore 609286 6 Defu Avenue 1 Singapore 539537
 329 Ubi Road 1 Singapore 538649

A member of COMFORTDELGRO

Date/Time: 13.01.2018 13:25 Page : 1

Team: AE ARC Repair TP(CLSO)1

JOB CARD Sales Order:

JC NO. 305106647

STOMER COMFORT TRANSPORTATION PTE LTD I/MS 7010045 STOMER NO 383 SIN MING DRIVE DRESS Singapore SINGAPORE 575717 65508755 (R) (O) (P)	REGN NO: SH 7441Y	MILEAGE
	MAKE: HYUNDAI	FUEL E.....1/2.....F
	MODEL SONATA	DATE/TIME IN 13.01.2018 08:25
	YR OF MANU 14.04.2011	TARGET DATE
	CHASSIS CODE KMHE141VMBA807319	COMPLETION DATE/TIME:

CHINA

SCOUNT CARD NO.

JOB DESCRIPTION

Accident Date: 12.01.2018
 NATURE: 3P 12.01.2018

S/NO	LABOR CODE	DESCRIPTION
------	------------	-------------

~~ACUTE~~

CHECKED & PASSED OUT BY: _____

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Acknowledgement Slip

Exit Pass

Vehicle No.: SH 7441Y
 Name: LIM KE

Vehicle No.: SH 7441Y

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard