

15/5/2010

INS. CASE OWNER:

CC 3/EQ1801

8787, Klee

LKK:

IDAC:

Surveyor:

kalvin

DOI:

ASSIGNMENT

15/10/08

Date / Time :

15/10/08

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

SLW 3550C

Claim No. :

Name of Insured :

Policy No. :

Insured Tel No. :

HP:

Make / Model :

Excess Sec II :SS

D.O.A :

12/10/08

Place of Accident :

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

Driver Tel No. :

(V/L: YES / NO)

OI GIA REPORT: YES / NO : TP GIA REPORT: YES / NO

Insured Liability :

%

Final ? Yes / No

SLC 7055L



INSRS:

WSP:

Tel :

Liability :

RMKS:

COBE
W

INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time	STAGE	DATE / PIC
SLC 7055L - 12/10/08	Non-Reporting ltr (1st):	
SLC 7055L - 12/10/08	Non-Reporting ltr (2nd):	
	Non-Reporting ltr (Final):	
	Notification ltr (if non-pickup):	
	Call OI:	
	After call ltr to OI:	
	Documentation Check List:	
	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:	
	Post-Repair Photos:	
	Others:	
PRELIMINARY ADVICE Date/Time:	Sent By:	
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\$	(S x days)	
Loss of Income (LOI): S\$	(S x days)	
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LO ☐	[Tick only one]	
GIA/LTA Search: S\$		
Medical: S\$		
Disbursement: S\$	(e.g. Tow/ Independent)	
Legal Cost: S\$		
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:	

Workshops

59 Loyang Drive Singapore 508969
383 Sin Ming Drive Singapore 575717
45 Pandan Road Singapore 609286
220 Ubi Road 3 Singapore 408699

24 Senoko Loop Singapore 758156
7 Sungei Kadut Way Singapore 728791
501 Yishun Industrial Park A Singapore 768732

member of COMFORTDELGRO

Date/Time: 15.10.2018 13:34 Page : 1

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

JC NO.: 305225853

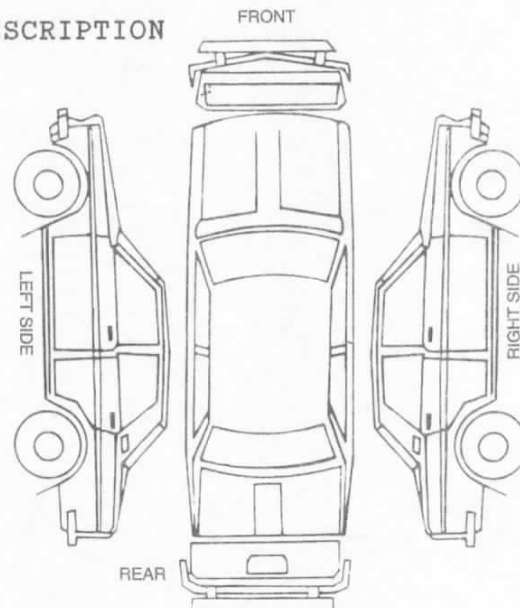
MEMBER COMFORT TRANSPORTATION PTE LTD 7010045 MEMBER NO. 383 SIN MING DRIVE Singapore SINGAPORE 575717 65508755 (R) (P) UNIT CARD NO.	REGN NO.: SHC3055L	MILEAGE
	MAKE : HYUNDAI	FUEL E.....1/2.....F
	MODEL IONIQ(G2)	DATE/TIME IN 14.10.2018 10:45
	YR OF MANU 03.07.2018	TARGET DATE
	CHASSIS CODE KMHC851CVJU103419	COMPLETION DATE/TIME:

JOB DESCRIPTION

Accident Date: 12.10.2018
NATURE: 3P 12.10.2018

S/NO LABOR CODE

DESCRIPTION



KED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

edgement Slip

Exit Pass

No.: SHC3055L LKE

Vehicle No.: SHC3055L

f Service Advisor

Signature/Date

Name of Service Advisor

Date

turned to Service Reception upon collection

To be kept by Security Guard