15/5/2010

INS. CASE OWNER: CC3 / CTI 1900 4279 / K1fa3

LKK:

IDAC:

ASSIGNMENT

Surveyor: Awk DOI: 7/3/19 Date / Time : 7/3/19

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : GBG 3784R Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 6/3/2019 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**

SHD 7140S → → →

INSRS:
WSP: ComfortDelGro.
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SHD7140S. U/Rcu180/6036/ASbez ;DOA:29/8/18
	GBG3784R - CC3/CTI 1900 4279/ K1fa3 ; DOA:10/3/19

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:		
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: AWK

Repair Cost: P/P S$ 940.00 (2 days) Reduction: 29 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 04.09.20 Confirm with CATHERINE Email ☐ Call ☐

Final Liability:	100	% 50	(Agreed / Assessed) BOLA S/N No. : NIL CONFLICTING VERSION	If NO or B 28, Ass. Lia :
Repair Cost w/GST	$1,005.80	S$ 502.90		
Loss of Rental (LOR):	225.34	S$ 112.67	(2 days) x $112.67	
Loss of Use (LOU):	-	S$ -	($ x days)	
Loss of Income (LOI):	100.00	S$ 50.00	($ 50 x 2 days)	
LOR only ☐	LOU only ☐	LOR + LOU ☐	LOR + LOI ☑ [Tick only one]	
GIA/LTA Search	$7.49	S$ 7.49		
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
Total:	$1,338.63	S$ 673.06	**Global Sum S$:** 680.00	

FINAL PAYMENT Date/Time: 04.09.20 Confirm with: CATHERINE Email ☐ Call ☐

Payee 1:	S$ 680.00	Name 1:	COMFORTDELGRO ENGINEERING PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	