INS. CASE OWNER:	SUNDARI	CC4/III19016322/Apa3	LKK:
			IDAC:

ASSIGNMENT

Surveyor:	ADRIAN	DOI: 19/09/2019	Date / Time : 16/09/2019
			Registered in Merimen: 16/09/2019

Pre-assign / CCU / FTE

Insured Vehicle No. :	**SHC 2163P**	Claim No. :	**MCT19090254**
Name of Insured :	COMFORT TRANSPORTATION PTE LTD	Policy No. :	**MCOM0015**
Insured Tel No. :	HP:	Make / Model :	**HYUNDAI I40**
Excess Sec II :S$	D.O.A : 11/09/2019 12:10	Place of Accident :	SINGAPORE CHECK POINT TWDS SINGAPORE

Is driver the owner? (YES / NO) Nature of Accident :

If **NO**, Driver Name / Age : **WONG SWI SING** OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : **+65-96608537** (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SLK 1106Y ⟶ _____ ⟶ _____ _____ ⟶ _____

INSRS:	INSRS:	INSRS:	INSRS:
WSP: AUTO N CARS	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time	SLK 1106Y - X	STAGE	DATE / PIC
	SHC 2163P - CC3/AIG14018549/H1pe3w2; DOA: 26/9/14	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:	
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$		1) Claim status: Normal/Reject/Private Settle	
Disbursement:	S$	(e.g. Tow/ Independent)	2) Report Format:	
Legal Cost	S$		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:		

REF: TI

ASS. REC. BY:

ASSIGNMENT

From: Date: 19/9/2019

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: SLK 1106Y

at Workshop m/s Auto N Cars Services

of BIK 1 kaki Bukit Ave 6 #01-90

Insured:

Policy No.

Claims No.

Sum Insured: Excess:

(Client's Record)

Make of Veh: 10am-12pm

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

	N/S	O/S

Bal. or Market Value:

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

nvp?

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: **Person Contacted:**

Veh No: SLK1106Y **Yr Regn:** 2012 Feb

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or

Make: BMW 116 c.c

Colour Silver. **A/C:** Insured / Std / NI / NA

Sp.Reading 138281 **T/Radio:** Insured / Std / NI / NA

Eng/No:

C/No: WBA1A12010E 948816.

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 225/45R17.
R: 225/45R17.

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Front		Rear	
R/Bal. 06	mm	R/Bal. 06	mm
L/Bal. 06	mm	L/Bal. 06	mm
D.O.A.		D.O.I. 15/09/18.	

Survey held at Auto N Car.

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Rear b/s.

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	TP 111

Date/Time, File Pass to? ☐ : Preli. Report

1) ☐ : Final Report

Date/Time, File Return to?

2)

Report Format :

Lump Sum / I.B.R.G

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp ($)
☐ : Interview ($)
☐ : Tech. Invs ($)
☐ : Weekend ($)

Survey Fee:	
Transportation:	
__S + RS.__SI	
Photos	
Others	
TOTAL	