

15/5/2010

INS. CASE OWNER:

Zuhaidah / CC3 / III160 / 3066, Khg3921

LKK:

DAC:

Surveyor:

Kenneth

DOI:

ASSIGNMENT

21/7/16

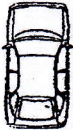
Date / Time:

17/7/16

Registered in Merimen:

14/7/16

Pre-assign / CCU / FTE



Insured Vehicle No.:

SHD 4861P

Claim No.:

MCT16070481

Name of Insured:

Comfort Transportation Pte Ltd

Policy No.:

MCOM0016

Insured Tel No.:

65508728

HP:

Make / Model:

Hyundai Sonata

Excess Sec II : SS

D.O.A.:

21/7/16

Place of Accident:

Slip Rd of PEX Corporation Road.

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

Nur Ingman BM Abdul Rasid

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

Driver Tel No.:

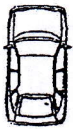
(V/L: YES / NO)

Insured Liability:

%

Final ? Yes / No

SHD 356H



INSRS:

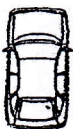
WSP:

Tel:

Liability:

RMKS:

Trans-CG6



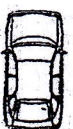
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time	STAGE	DATE / PIC
28/7/16	Non-Reporting ltr (1st):	
28/7/16	Non-Reporting ltr (2nd):	
28/7/16	Non-Reporting ltr (Final):	
28/7/16	Notification ltr (if non-pickup):	
22/08/16	Call OI:	JC
22/08/16	After call ltr to OI:	
23/08/16	Documentation Check List:	Handler Typist
23/08/16	Notification ltr (if non-pickup)	☐
23/08/16	After call ltr to OI:	☐
23/08/16	Authorisation To Act:	☒
23/08/16	Release Voucher:	☒
23/08/16	Final Repair Bill:	☒
23/08/16	Car Rental Invoice:	☒
23/08/16	Towing Invoice:	☐
23/08/16	LTA / GIA:	☐
23/08/16	Medical Bill:	☐
23/08/16	PIR:	☐
23/08/16	Mandate/Reject Instruction:	☒
23/08/16	LOD	☒
23/08/16	Payment Breakdown Form:	☐
23/08/16	Post-Repair Photos:	☐
23/08/16	Others:	☐
PRELIMINARY ADVICE Date/Time: Sent By: Approved by: 23-08-17 Date: 23-08-17		
FINALIZATION Date/Time: Confirm with: Confirm by:		
Repair Cost: 121 \$S 3,001.20 (2.5 days) Reduction: 79 % Email ☐ Call ☐		
FINAL SETTLEMENT Date/Time: 11/10/19 Confirm with: Wai Yin Email ☒ Call ☐		
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No.: NIL		
Repair Cost: (w/ LTA) \$S 3300.28		
Loss of Rental (LOR): \$S 467.80 (2 days) x \$123.75		
Loss of Use (LOU): \$S — (\$ x days)		
Loss of Income (LOI): \$S 80.00 x 2 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 —		
Total: \$S 3,647.78 Global Sum \$S: 2,800.00		
FINAL PAYMENT Date/Time: Confirm with: Email ☐ Call ☐		
Payee 1: \$S 2,800.00 Name 1: TRANS-CG6 AUTO SERVICES PTE LTD		
Payee 2: (Strike if N.A.) \$S — Name 2:		
Payee 3: (Strike if N.A.) \$S — Name 3:		