15/5/2010

INS. CASE OWNER: PRIYA | CC4/III19019828/Epa3 | LKK: IDAC:

ASSIGNMENT

Surveyor: STEVE DOI: 04/11/2019 Date / Time : 07/11/2019

Registered in Merimen: 08/11/2019

Pre-assign / CCU / FTE

Insured Vehicle No. : SHA 4505J Claim No. : MCT19100753

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 : 28/10/2019 11:30 Place of Accident : LUXUS HILL AVE

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

If NO, Driver Name / Age : ANG TIAN TEK OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : +65-91895811 (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SMG 896R → → →

 INSRS: WSP: Eurokars Tel : Habitat Liability : RMKS:	 INSRS: WSP: Tel : Liability : RMKS:	 INSRS: WSP: Tel : Liability : RMKS:	 INSRS: WSP: Tel : Liability : RMKS:

Date/ Time		STAGE	DATE / PIC
	SMG 896R - X	Non-Reporting ltr (1st):	
	SHA 4505J - NS/INC19013708/K1sf3e2; DOAI 4/8/19	Non-Reporting ltr (2nd):	
	- NS/INC19013708/K1sf3e2; DOA: 27/2/16	Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
		Call OI:	
		After call ltr to OI:	
17/04/2020	Pls refer to Views for details.	**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: P/P	S$ 4,335.82 (2 days) Reduction: 18 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 17/04/2020	Confirm with Jen	Email ✓ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 22	If NO or B 28, Ass. Lia :
Repair Cost w/GST	S$ 4,639.33		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 200.00 ($100 x 2 days)		
Loss of Income (LOI):	S$ ($ 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: TP
Legal Cost	S$		3) Survey fee: $350.00
Total:	S$ 4,839.33	**Global Sum S$:**	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ✓ Call ☐
Payee 1:	S$ 4,839.33	Name 1: Eurokars Habitat Pte Ltd	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	