

ASSIGNMENT

Surveyor:

LEE HOCK ANN

DOI: 26/12/2019

Date / Time : 26.12.2019

Registered in Merimen: 26.12.2019

Pre-assign / CCU / FTE



Insured Vehicle No. : SHD 6594Y

Claim No. :

Name of Insured : COMFORT TRANSPORTATION

Policy No. : MCOM0015

Insured Tel No. : HP: 21/12/2019 16:10

Make / Model : HYUNDAI I40

Excess Sec II :S\$

D.O.A : 21/12/2019 16:10

Place of Accident : ADMIRALITY ST (LOOP)

Is driver the owner? (YES / ☒ NO) Nature of Accident :If NO, Driver Name / Age : GARY SOO CHEE SIONG(SU ZHISONG) OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NO

Driver Tel No. : +65-96820899

(V/L: YES / NO)

Insured Liability : % Final ? Yes / No

SKV 5968D

INSRS:
WSP: SAT MOTORS
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SKV 5968D - X	Non-Reporting ltr (1st):	
	SHD 6594Y - CC3/CTI19012200/K1ea3q2; DOA: 08.07.19	Non-Reporting ltr (2nd):	
	- CC4/ASM18001262/K1pb3q2; DOA : 16.01.18	Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
		Call OI:	
		After call ltr to OI:	
20/04/2020	Pls refer to Views for details.	Documentation Check List:	Handler Typist
		Notification ltr (if non-pickup)	<input type="checkbox"/>
		After call ltr to OI:	<input type="checkbox"/>
		Authorisation To Act:	<input type="checkbox"/>
		Release Voucher:	<input type="checkbox"/>
		Final Repair Bill:	<input type="checkbox"/>
		Car Rental Invoice:	<input type="checkbox"/>
		Towing Invoice	<input type="checkbox"/>
		LTA / GIA :	<input type="checkbox"/>
		Medical Bill:	<input type="checkbox"/>
		PIR:	<input type="checkbox"/>
		Mandate/Reject Instruction:	<input type="checkbox"/>
		LOD	<input type="checkbox"/>
		Payment Breakdown Form:	<input type="checkbox"/>
		Post-Repair Photos:	<input type="checkbox"/>
		Others:	<input type="checkbox"/>

PRELIMINARY ADVICE		Date/Time:	Sent By:	Confirm by:
FINALIZATION		Date/Time:	Confirm with:	Confirm by:
Repair Cost:	L/sum	S\$ 4,050.00	(5 days) Reduction: 71 %	Email <input type="checkbox"/> Call <input type="checkbox"/>
FINAL SETTLEMENT		Date/Time: 20/04/2020	Confirm with Jonathan	Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>
Final Liability:	%	100	(Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost:	S\$	4,050.00		
Loss of Rental (LOR):	S\$	1,050.00	(7 days) x \$150.00	
Loss of Use (LOU):	S\$		(\$ x days)	
Loss of Income (LOI):	S\$		(\$ x days)	
LOR only <input checked="" type="checkbox"/>	LOU only <input type="checkbox"/>	LOR + LOU <input type="checkbox"/>	LOR + LOI <input type="checkbox"/>	[Tick only one]
GIA/LTA Search	S\$	7.45		
Medical:	S\$			
Disbursement:	S\$	120.00	(e.g <input checked="" type="checkbox"/> Tow Independent)	
Legal Cost	S\$			
Total:	S\$	5,227.45	Global Sum S\$:	
FINAL PAYMENT		Date/Time:	Confirm with:	Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>
Payee 1:	S\$	5,227.45	Name 1: Sat Motors SAT (SG) PTE LTD	
Payee 2: (Strike if N.A.)	S\$		Name 2:	
Payee 3: (Strike if N.A.)	S\$		Name 3:	

1) Claim status: Normal/Reject/Private Settlement

2) Report Format: TP

3) Survey fee: \$500.00