15/5/2010

INS. CASE OWNER: CC 4 / AIG 2000 0064 / Fds3

LKK:

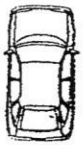
IDAC:

ASSIGNMENT

Surveyor: Ram DOI: 31/12/19 Date / Time: 30/12/19

Registered in Merimen: 2/1/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SLJ 2546J Claim No. :

Name of Insured : SNG Hwee Hock @ Patrick SNG Policy No. :

Insured Tel No. : HP: Make / Model :

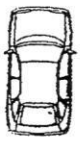
Excess Sec II :S$ D.O.A : 28/12/19 Place of Accident :

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

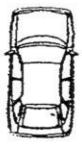
If **NO**, Driver Name / Age : OI GIA REPORT: (YES) / NO ; TP GIA REPORT: (YES) / NO

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

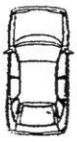
SHD 3897T → → →



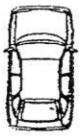
INSRS:
WSP: Comfortdelgro
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SHD 3897T : CS/FC1910872B/EVO3E2 ; D.O.A: 24/4/19
	SLJ 2546J : X

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:
Repair Cost:	S$ 1504.00 (2 days)	Reduction: 15 %	Email [ ] Call [ ]
FINAL SETTLEMENT	Date/Time: 12/8/2020	Confirm with Kazali	Email [/] Call [ ]
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: (w/GST)	S$ 1609.28		
Loss of Rental (LOR):	S$ 389.95 (3 days)	+2hours (x$126.47)	
Loss of Use (LOU):	S$ - ($ x days)		
Loss of Income (LOI):	S$ 150.00 ($ 50 x 3 days)		
LOR only [ ] LOU only [ ]	LOR + LOU [ ] LOR + LOI [/]	[Tick only one]	
GIA/LTA Search	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: $320
Total:	**S$ 2156.72**	**Global Sum S$:** 2150.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email [ ] Call [ ]
Payee 1:	S$ 2150.00	Name 1: Comfort Delgro Engineering Pte Ltd	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	