

INS. CASE OWNER: MAY CHUA

CC4/FCI20000568/Dea3

LKK:

IDAC:

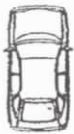
Surveyor: BRYAN

ASSIGNMENT
DOI: 06/01/2020

Date / Time : 08/01/2020

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : SHC 8350B

Name of Insured : COMFORT TRANSPORTATION PTE LTD

Insured Tel No. : HP: —

Excess Sec II : S\$

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age : SIM KIM HWA

Driver Tel No. : +65-90039003

(V/L: YES / NO)

Claim No. : D20000180MFSH

Policy No. : D-19092580MFSH

Make / Model : HYUNDAI I40

Place of Accident : BOON LAY WAY X JURONG GATEWAY

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

Insured Liability : % Final ? Yes / No

SHA 3083R

INSRS:
WSP: CHUNNI
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	STAGE	DATE / PIC
SHA 3083R - NS/INC11007648/H1bn; DOA: 22.4.11	Non-Reporting ltr (1st):	
SHC 8350B - NA/FCI17022697/r3; DOA : 28.11.17	Non-Reporting ltr (2nd):	
- NBA/GAI17011206/Y; DOA: 24.5.17	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: ABT
Repair Cost: L/S S\$ 30,000	(15 days) Reduction:	48 % Email ☐ Call ☐
FINAL SETTLEMENT Date/Time: 12.08.20	Confirm with WILLIAM	Email ☐ Call ☐
Final Liability: % 100	(Agreed / Assessed) BOLA S/N No. : 5	If NO or B 28, Ass. Lia :
Repair Cost: w/GST S\$ 32,100.00		OI MAKE A RIGHT TURN AT CONTROL JUNCTION
Loss of Rental (LOR): S\$ 1,755.60	(14 days) X \$125.40	
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\$ -		1) Claim status: Normal/Reject/Private Settle
Medical: S\$ -		2) Report Format: TP
Disbursement: S\$ -	(e.g. Tow/ Independent)	3) Survey fee: \$600
Legal Cost S\$ -		
Total: S\$ 33,855.60	Global Sum S\$: 33,800.00	
FINAL PAYMENT Date/Time: 12.08.20	Confirm with: WILLIAM	Email ☐ Call ☐
Payee 1: S\$ 33,800.00	Name 1: CHUNNI MOTOR WORK PTE LTD	
Payee 2: (Strike if N.A.) S\$	Name 2:	
Payee 3: (Strike if N.A.) S\$	Name 3:	