15/5/2010

INS. CASE OWNER: ~~MAY CHUA~~ KAREN TAN

CC4/FCI20001681/Dea3s2 ~~CC4/FCI20001681/Dda3~~

LKK:

IDAC:

ASSIGNMENT

Surveyor: BRYAN DOI: 30/1/2020 Date / Time : 30/01/2020

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : SHB 4300C

Name of Insured : COMFORT TRANSPORTATION PTE LTD

Insured Tel No. : HP:

Excess Sec II :S$

Is driver the owner? (YES / NO)

If NO, Driver Name / Age : CHUA AH MAI

Driver Tel No. : +65-97893125 (V/L: YES / NO)

Claim No. : D20000643MFSH X

Policy No. : D-20094922MFSH

Make / Model : HYUNDAI I40

Place of Accident : HOUGANG AVE 7 X AVE 5

D.O.A : 24/01/2020 09:50

Nature of Accident :

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

Insured Liability : % **Final ? Yes / No**

SHB 4300C →	SHC 3757U →	SML 9062U →
INSRS: WSP: Tel : Liability : RMKS: OI	INSRS: WSP: BIFROST Tel : AUTO Liability : RMKS: TP	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SHB4300C - CS/FCI18023101/Kvd3n2; DOA: 21.12.18
	- NS/INC13018587/H1tbd1; DOA: 04.10.13
	SHC 3757U - NS/INC10008976/Fr1; DOA: 06.05.10

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: ABT

Repair Cost: L/S S$ 16,900.00 (10 days) Reduction: 54 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 20.08.22 Confirm with MR YEE Email ☐ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 28	If NO or B 28, Ass. Lia : 0%
Repair Cost: w/GST	S$ 18,083.00 3VEH CC OID LAST	
Loss of Rental (LOR):	S$ 4,255.20 (36 days) X $118.20	
Loss of Use (LOU):	S$ - ($ x days)	
Loss of Income (LOI):	S$ 1,800.00 ($ 50 x 36 days)	
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☑ [Tick only one]		
GIA/LTA Search	S$ -	
Medical:	S$ -	1) Claim status: Normal/[illegible]
Disbursement:	S$ 40.00 (e.g. Tow/[illegible])	2) Report Format: TP
Legal Cost	S$ -	3) Survey fee: $600
Total:	S$ 24,178.20 **Global Sum S$:** 24,170.00	

FINAL PAYMENT Date/Time: 20.08.22 Confirm with: MR YEE Email ☐ Call ☐

Payee 1:	S$ 24,170.00	Name 1:	BIFROST AUTO PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	