INS. CASE OWNER: MAY CHUA | CC4/FCI20002474/Eda3q2 | LKK: IDAC:

ASSIGNMENT

Surveyor: STEVE DOI: 19/02/2020 Date / Time : 12/02/2020

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : SHC 3240T Claim No. : D20000931MFSH/1

Name of Insured : COMFORT TRANSPORTATION PTE LTD Policy No. : D-18088936MFSH

Insured Tel No. : HP: Make / Model : HYUNDAI IONIQ

Excess Sec II :S$ D.O.A 09/02/2020 05:45 Place of Accident : TERMINAL 1 DEPARTURE HALL

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**

SKX 7318G → → →

INSRS:
WSP:
Tel :
Liability :
RMKS:

CYCLE & CARRIAGE

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SKX 7318G - X SHC 3240T - X	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$ (days) Reduction: % Email Call