INS. CASE OWNER: MAY CHUA   CC4/FCI20002475/Ɛ da3

LKK:
IDAC:

ASSIGNMENT

Surveyor: STEVE   DOI: ~5/1/2020   Date / Time : 12/02/2020

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : SH 8290J	Claim No. : D20000947MFSH
Name of Insured : COMFORT TRANSPORTATION PTE LTD	Policy No. : D-20094922MFSH
Insured Tel No. : HP:	Make / Model :
Excess Sec II :S$ D.O.A : 02/02/2020 09:00	Place of Accident : HILLCREST ARCADIA BASEMENT CARPARK , S(289849)
Is driver the owner? (YES / NO) Nature of Accident :	

If **NO**, Driver Name / Age :

Driver Tel No. :   (V/L: YES / NO)

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

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

SJU 3988B → →   →

INSRS: MOVA	INSRS:	INSRS:	INSRS:
WSP:	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time		STAGE	DATE / PIC
	SH 8290J - CS/FCI18009359/Atd3n2; DOAI 20.05.18	Non-Reporting ltr (1st):	
	- CC3/AIG13000781/H1h2a3q2; DOA: 10.01.13	Non-Reporting ltr (2nd):	
	SJU 3988B - CC4/AXA14005630/Gjy3q2 ; DOA: 25.03.14	Non-Reporting ltr (Final):	
	CV/DBS15002442/R1Kcd1	Notification ltr (if non-pickup):	
		Call OI:	
		After call ltr to OI:	
	WITHOUT PREJUDICE: ACCIDENT NOT REPORTED:	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:	
PRELIMINARY ADVICE Date/Time: Sent By:		Others:	

FINALIZATION	Date/Time:	Confirm with:	Confirm by:	
Repair Cost:	S$ 2,650.00 (3 days) Reduction: 34 %		Email ☐ Call ☐	

FINAL SETTLEMENT	Date/Time: 22/05/2020 Confirm with Suann	Email ✓ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :	
Repair Cost: (w/GST)	S$ 2,835.50		
Loss of Rental (LOR):	S$ - (days)		
Loss of Use (LOU):	S$ 440.00 ($110 x 4 days)		
Loss of Income (LOI):	S$ - ($ x days)		
LOR only ☐ LOU only ✓ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]			
GIA/LTA Search	S$ 7.49	1) Claim status: Normal/Reject/Private Settle	
Medical:	S$ -	2) Report Format: TP	
Disbursement:	S$ - (e.g. Tow/ Independent)	3) Survey fee: $350	
Legal Cost	S$ -		
Total:	S$ 3,282.99	Global Sum S$:	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 3,282.99	Name 1: MOVA Automotive Pte Ltd	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	