

INS. CASE OWNER:

JOANNE YONG

CC6/FCI20003052/Uea3

LKK:

IDAC:

ASSIGNMENT

Surveyor:

MARCUS

DOI: 24/02/2020

Date / Time : 24/02/2020

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SHC 8257M

Claim No. : _____

Name of Insured : COMFORT TRANSPORTATION PTE LTD

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 12/02/2020

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

SMP 4854M

INSRS:
WSP: LEE BRO
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SMP 4854M - X		
	SHC 8257M - CB/AIG10001380/j; DOA : 25.01.08	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:	☐

PRELIMINARY ADVICE	Date/Time:	Sent By:	
			Post-Repair Photos: ☐
			Others: ☐

FINALIZATION	Date/Time:	Confirm with:	Confirm by: CKS
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Repair Cost:	L/S	S\$ 4,700.00	(5 days) Reduction: 30 %	Email ☐	Call ☐
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FINAL SETTLEMENT	Date/Time: 15.07.20	Confirm with SEBASTIAN	Email ☐	Call ☐
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Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
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Repair Cost:	w/GST	S\$ 5,029.00	OID ENCROACHED TP LANE
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Loss of Rental (LOR):	S\$ 500.00	(5 days) X \$100	
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Loss of Use (LOU):	S\$ -	(\$ x days)	
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Loss of Income (LOI):	S\$ -	(\$ x days)	
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LOR only ☒	LOU only ☐	LOR + LOU ☐	LOR + LOI ☐ [Tick only one]
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GIA/LTA Search	S\$ 36.45		
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Medical:	S\$ -		1) Claim status: Normal/ Project/Dispute/Other
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Disbursement:	S\$ -	(e.g. Tow/ Independent)	2) Report Format: TP
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Legal Cost	S\$ -		3) Survey fee: \$350
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Total:	S\$ 5,565.45	Global Sum S\$:	
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FINAL PAYMENT	Date/Time: 15.07.20	Confirm with: SEBASTIAN	Email ☐	Call ☐
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Payee 1:	S\$ 5,565.45	Name 1:	LEE BROTHERS AUTOMOTIVE PTE LTD
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Payee 2: (Strike if N.A.)	S\$	Name 2:	
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Payee 3: (Strike if N.A.)	S\$	Name 3:	
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