15/5/2010

INS. CASE OWNER: Sherini Pillai | CC4/III20003421/Gpa3 | LKK: IDAC:

ASSIGNMENT

Surveyor: XING GUO QIANG DOI: 02/03/2020 Date / Time : 02/03/2020
Registered in Merimen: 02/03/2020

Pre-assign / CCU / FTE

Insured Vehicle No. : SHD 3642L
Name of Insured : COMFORT TRANSPORTATION PTE LTD
Insured Tel No. : HP:
Excess Sec II :S$ D.O.A : 28/02/2020
Is driver the owner? (YES / NO)
If NO, Driver Name / Age : CHEW TEE WAN @ DERRICK CHEW
Driver Tel No. : +65-98776863 (V/L: YES / NO)

Claim No. :
Policy No. : MCOM0015
Make / Model : HYUNDAI I40
Place of Accident : CROSS ST X RAFFLES QUAY
Nature of Accident :
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO
Insured Liability : % **Final ? Yes / No**

SHC 7228D → → →

INSRS:
WSP: DING AUTOMOTIVE
Tel :
Liability :
RMKS:

INSRS: WSP: Tel : Liability : RMKS:

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INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SHC 7228D - CS/FCI14010394/H1gbu2 ; 31.5.14
	SHD 3642L - CC3/III15022322/H1jb3q2 ; 24/12/2015
	CS/RSI14023740/H1gbk3 ; 20/12/2014
	NS/INC12017965/H1b2n ; 13/09/2012
	NS/INC15021154/H1qbn2 ; 06/12/2015
14/04/2020	PLS SEE VIEWS FOR DETAILS

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:
Repair Cost: P/P S$ 1,015.00 (4 days) Reduction: 81 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time 14/04/2020 Confirm with Shinah Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 15	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 1,086.05	
Loss of Rental (LOR):	S$ 421.20 (4 days) x $105.30	
Loss of Use (LOU):	S$ ($ x days)	
Loss of Income (LOI):	S$ 160.00 ($40 x 4 days)	
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ✓ [Tick only one]		
GIA/LTA Search	S$ 7.45	
Medical:	S$	1) Claim status: Normal/[redacted]
Disbursement:	S$ (e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$	3) Survey fee: $350.00
Total:	S$ 1,674.70 **Global Sum S$:** 1,670.00	

FINAL PAYMENT Date/Time: Confirm with: Email ✓ Call ☐

Payee 1:	S$ 1,670.00	Name 1:	Ding Automotive Pte. Ltd.
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	