

INS. CASE OWNER:

MAY CHUA

CC4/FCI20003423/Fda3

LKK:

IDAC:

Surveyor:

RAM

DOI:

ASSIGNMENT
02/03/2020

Date / Time : 02/03/2020

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SHD 4900K
 Name of Insured : COMFORT TRANSPORTATION PTE LTD
 Insured Tel No. : HP: _____
 Excess Sec II :S\$ _____ D.O.A : 26/02/2020 23:00
 Is driver the owner? (YES / ☒ NO) Nature of Accident :

Claim No. : D20001242MFSH
 Policy No. : D-20094922MFSH
 Make / Model : HYUNDAI IONIQ
 Place of Accident : ALONG CHANGI SOUTH AVE 4 TWDS
 CHANGI SOUTH AVE 3

If NO, Driver Name / Age : LIM WEE CHONG
 Driver Tel No. : +65-97547757 (V/L: YES / NO)

OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NO
 Insured Liability : % Final ? Yes / No

SHC 6367S



INSRS:
WSP: PREMIER
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	STAGE	DATE / PIC
SHC 6367S - CC3/AIG14006312/H1uy3q2 ; 02/04/2014	Non-Reporting ltr (1st):	
CC3/QBE15007689/H1ua3s2-1 ; 02/05/2015	Non-Reporting ltr (2nd):	
SHD 4900K - CS/FCI18016815/Usbn2 ; 12/09/2018	Non-Reporting ltr (Final):	
CS/FCI18022027/R1vbe2 ; 05/12/2018	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\$ 1,900.00 (3 days) Reduction: 67 %

Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 21/04/2020 Confirm with Vincent Chua

Email ☒ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27

If NO or B 28, Ass. Lia :

Repair Cost: (w/GST) S\$ 2,033.00

Loss of Rental (LOR): S\$ 725.20 (7 days) x \$103.60

Loss of Use (LOU): S\$ - (\$ x days)

Loss of Income (LOI): S\$ - (\$ x days)

LOR only ☒ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]

GIA/LTA Search

S\$ -

Medical:

S\$ -

Disbursement:

S\$ -

Legal Cost

S\$ -

Total: S\$ 2,758.20

Global Sum S\$: 2,750.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email ☐ Call ☐

Payee 1: S\$ 2,750.00

Name 1:

Premier Automotive Services Pte Ltd

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3: