

15/5/2010

Cathan Heng Ding Chao

INS. CASE OWNER:

CC 4 / FCI 2000 4770 / 61ps3

LKK:

IDAC:

ASSIGNMENT

Surveyor:

XGB

DOI:

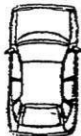
1/4/2020

Date / Time:

1/4/2020

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SHD 3287D

Claim No. :

Name of Insured : COMFORT TRANSPORTATION PTE LTD

Policy No. :

Insured Tel No. : HP:

Make / Model :

Excess Sec II :SS

D.O.A : 27/3/2020

Place of Accident :

Is driver the owner? (YES / ☒ NO)

Nature of Accident :

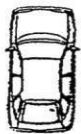
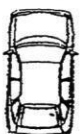
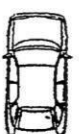
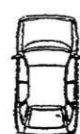
If NO, Driver Name / Age :

Driver Tel No. :

(V/L: ☒ YES / NO)OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NO

Insured Liability : % Final ? Yes / No

64 9999U

INSRS:
WSP: VFX
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time

64 9999U : X

SHD 3287D : 08/FCI/6027521/Kgh3n2; D.O.A: 27/11/16

STAGE

DATE / PIC

15/04/2020

✓ REC'D OI GIA REPORT

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

After call ltr to OI:

21/07/2020

Pls refer to VIEWS for details.

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:

Repair Cost/sum

S\$ 2,000.00

(7 days)

Reduction:

93

%

Email ☐Call ☐

FINAL SETTLEMENT

Date/Time: 21/07/2020

Confirm with Weng Sheng

Email ☒Call ☐

Final Liability:

% 100

(Agreed / Assessed) BOLA S/N No. : 27

If NO or B 28, Ass. Lia :

Repair Cost: w/GST

S\$ 2,140.00

Loss of Rental (LOR):

S\$ 720.00

(9 days)

X \$80.00

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\$ 7.45

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

1) Claim status: Normal/Reject/Private Settle

2) Report Format: TP

3) Survey fee:

\$600.00

Total:

S\$ 2,867.45

Global Sum S\$:

FINAL PAYMENT

Date/Time:

Confirm with:

Email ☒Call ☐

Payee 1:

S\$ 2,867.45

Name 1:

Vfix Auto Pte Ltd

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3: