15/5/2010

INS. CASE OWNER: Sundari Nagarajan

CC4/III20004784/Kga3

LKK:

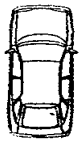
IDAC:

ASSIGNMENT

Surveyor: KENNETH DOI: 15/04/2020 Date / Time : 15/04/2020

Registered in Merimen: 01/04/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SHA 6233E Claim No. : MCT20030499

Name of Insured : COMFORT TRANSPORTATION PTE LTD Policy No. : MCOM0015

Insured Tel No. : HP: Make / Model :

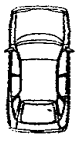
Excess Sec II :S$ D.O.A : 29/03/2020 Place of Accident : SUNRISE WAY

Is driver the owner? (YES / NO) Nature of Accident :

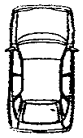
If **NO**, Driver Name / Age : PANG AH CHOO OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : 96396223 (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

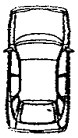
SMR 2589G → → →



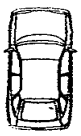
INSRS:
WSP: MBM
Tel : WHEELPOWER
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SMR 2589G - X	**STAGE**	**DATE / PIC**
		Non-Reporting ltr (1st):	
	SHA 6233E - X	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: L/S	S$ 1950.00	(3 days)	Reduction: 13,255.40	% 87	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 08/07/2020	Confirm with IVY		Email ☑ Call ☐	
Final Liability:	% 100	(Agreed / Assessed)	BOLA S/N No. : 22	If NO or B 28, Ass. Lia :	
Repair Cost:	S$ 2086.50	(W/GST)			
Loss of Rental (LOR):	S$ 577.80	(3 days)	x $192.60 (W/GST)		
Loss of Use (LOU):	S$	($ 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$			1) Claim status: Normal/Reject/Private Settle	
Disbursement:	S$	(e.g. Tow/ Independent)		2) Report Format:	TP
Legal Cost	S$			3) Survey fee:	$600.00
Total:	**S$** 2664.30	**Global Sum S$:** 2650.00			

FINAL PAYMENT	Date/Time:		Confirm with:	Email ☑ Call ☐	
Payee 1:	S$ 2650.00	Name 1:	MBM WHEELPOWER PTE LTD		
Payee 2: (Strike if N.A.)	S$	Name 2:			
Payee 3: (Strike if N.A.)	S$	Name 3:			