

ASSIGNMENTSurveyor: **MARCUS**DOI: **08/05/2020**Date / Time : **30/04/2020**Registered in Merimen: **30/04/2020****Pre-assign / CCU / FTE**Insured Vehicle No. : **SH 9984J**

Claim No. : _____

Name of Insured : **COMFORT TRANSPORTATION PTE LTD**

Policy No. : _____

Insured Tel No. : **65508768**

HP: _____

Make / Model : **TOYOTA PRIUS****Excess Sec II :S\$**D.O.A : **25/04/2020**Place of Accident : **TG KATONG RD**Is driver the owner? (YES / **NO**) Nature of Accident : _____If **NO**, Driver Name / Age : **RAHMAT B AHMAD**OI GIA REPORT: **YES** / NO ; TP GIA REPORT: **YES** / NODriver Tel No. : **86834997**(V/L: **YES** / NO)Insured Liability : % **Final ? Yes / No****SFH 1269Y**INSRS:
WSP: **AUTOLUTION INDUSTRIAL**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SFH 1269Y - NA/INC14010812/e1 13/06/2014	STAGE	DATE / PIC
		Non-Reporting ltr (1st):	
	SH 9984J - CS/LAW14011839/Kqm3k3 20/01/2013	Non-Reporting ltr (2nd):	
	NS/INC18007484/K1rbn2 21/04/2018	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:
Repair Cost: P/P	S\$ 2,068.54	(3 days) Reduction: 5,173.68/71 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 14/8/2020	Confirm with ELMER	Email ☒ Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 15	If NO or B 28, Ass. Lia :
Repair Cost: (w/ GST)	S\$ 2,213.34		
Loss of Rental (LOR)(w/ GST)	S\$ 353.10	(3 days) X \$110	
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: \$350
Total:	S\$ 2,566.44	Global Sum S\$:	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S\$ 2,566.44	Name 1:	Autolution Industrial Pte Ltd
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	