

ASSIGNMENT

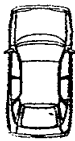
Surveyor:

ADRIAN

DOI: 24/06/2020

Date / Time : 16/06/2020

Registered in Merimen: _____

Pre-assign / CCU / FTE

Insured Vehicle No. : SHC 8138Z

Claim No. : D20002407MFSH

Name of Insured : COMFORT TRANSPORTATION PTE LTD

Policy No. : D-20094922MFSH

Insured Tel No. : _____ HP: _____

Make / Model : HYUNDAI I40

Excess Sec II :\$ D.O.A : 10/06/2020 16:00

Place of Accident : TAMPINES AVE 10 TWDS TAMPINES AVE 1

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

If NO, Driver Name / Age : STEPHEN YONG CHOON SENG

OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NODriver Tel No. : +65-81007390 (V/L: ☒ YES / NO)

Insured Liability : % Final ? Yes / No

SJS 9709L

SHC 8138Z

SGU 3161E

INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS: OIINSRS: PEOPLE'S
WSP: VEHICLE
Tel : RECOVERY
Liability : SERVICE
RMKS: TPINSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SGU 3161E - NA/INC19012509/h4 ; 15.07.2019	STAGE
	SHC 8138Z - CA/AIG10017926/r ; 07/09/2010	DATE / PIC
	CC3/AXA11009299/H1ec3q2 ; 17/05/2011	Non-Reporting ltr (1st):
	CC3/AXA12000977/H1ec3f1 ; 10/01/2012	Non-Reporting ltr (2nd):
	CC3/CTI16002708/H1wb3q2 ; 10/02/2016	Non-Reporting ltr (Final):
	CS/INC08030105/Ccz1 ; 19/10/2008	Notification ltr (if non-pickup):
	NS/INC11017821/M1vm ; 29/08/2011	Call OI:
	NS/INC18022006/K1vbe2 ; 05/12/2018	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: S\$ 2,000.00 (3 days) Reduction: 54 %		Email ☐ Call ☐
FINAL SETTLEMENT Date/Time: 24/08/2020 Confirm with Apple		Email ☒ Call ☐
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 28		If NO or B 28, Ass. Lia : 0%
Repair Cost: (w/GST) S\$ 2,140.00		3 veh C.C, OI was 2nd
Loss of Rental (LOR): S\$ - (days)		
Loss of Use (LOU): S\$ 270.00 (\$ 90 x 3 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\$ -		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\$ 2,417.45	Global Sum S\$:	
FINAL PAYMENT Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1: S\$ 2,417.45	Name 1: People's Vehicle Recovery Service	
Payee 2: (Strike if N.A.) S\$	Name 2:	
Payee 3: (Strike if N.A.) S\$	Name 3:	