15/3/2019

INS. CASE OWNER: CC 4 / FCI 2000 6652 / Kes3

LKK:

IDAC:

ASSIGNMENT

Surveyor: Kenneth DOI: 25/06/2020 Date / Time : 25/06/2020

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : SHD 7040Y Claim No. :

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

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 11/06/2020 Place of Accident :

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

If NO, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

SMC 3533P → → →

INSRS:
WSP: CITY AUTO
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SMC 3533P : X ; SHD 7040Y : X

Reject Case
By (staff) :
Approved by : lm
Date : 10/09/20

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
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: KSC
Repair Cost: L/S	S$ 3,100.00	(2 days)	Reduction: 54 %	EXCLUDE CHECK ITEM $320.25 Email Call
FINAL SETTLEMENT	Date/Time: 09.09.20		Confirm with	Email Call
Final Liability:	% 0	(Agreed / Assessed)	BOLA S/N No. : 24	If NO or B 28, Ass. Lia :
Repair Cost:	S$		TP EXIT PARKING LOT HIT OID	
Loss of Rental (LOR):	S$	(days)		
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 Cash~~
Disbursement:	S$	(e.g. Tow/ Independent)		2) Report Format: TP / WP
Legal Cost	S$			3) Survey fee: $209
Total:	S$	Global Sum S$:		
FINAL PAYMENT	Date/Time:	Confirm with:		Email Call
Payee 1:	S$	Name 1:		
Payee 2: (Strike if N.A.)	S$	Name 2:		
Payee 3: (Strike if N.A.)	S$	Name 3:		

SURVEY FEE: $145
TRANSPORT: $50
PHOTO : $14