15/5/2010

INS. CASE OWNER:

CC4/FCI20007271/ea3

LKK:

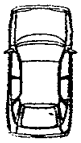
IDAC:

ASSIGNMENT

Surveyor: _____ DOI: _____ Date / Time : 14/07/2020

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : SHD 3168P Claim No. : D20002754MFSH

Name of Insured : COMFORT TRANSPORTATION PTE LTD Policy No. : D-20094922MFSH

Insured Tel No. : _____ HP: _____ Make / Model : HYUNDAI I40

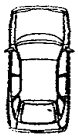
Excess Sec II :S$ _____ D.O.A : 09-07-2020 Place of Accident : PIE TOWARDS SIM DRIVE

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

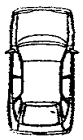
If **NO**, Driver Name / Age : LIM JEE TEE OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

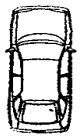
SLS 4504U → _____ → _____ → _____



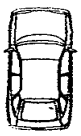
INSRS:
WSP: TAN LIM
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SHD3168P - CS/FCI15012893/R1gbd1 ; 28/07/2015	**STAGE** **DATE / PIC**
	SLS 4504U - X	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:
PRELIMINARY ADVICE	Date/Time: Sent By:	Post-Repair Photos:
		Others:

FINALIZATION	Date/Time:	Confirm with:	Confirm by: CKS
Repair Cost: L/S	S$ 2,400.00 (3 days)	Reduction: 46 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 16.09.20	Confirm with PATRICIA	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 15	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 2,568.00	OID CHANGED LANE HIT TP	
Loss of Rental (LOR): w/GST	S$ 321.00 (3 days)	X $100	
Loss of Use (LOU):	S$ - ($ 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: $320
Total:	**S$** 2,889.00	**Global Sum S$:**	

FINAL PAYMENT	Date/Time: 16.09.20	Confirm with: PATRICIA	Email ☐ Call ☐
Payee 1:	S$ 2,889.00	Name 1:	TAN LIM MOTOR PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	