

INS. CASE OWNER:

CC 4 / III 2000 7536 /

Qps3

LKK:

IDAC:

ASSIGNMENT

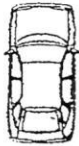
Surveyor: OSP

DOI: 05/10/2020

Date / Time : 21/07/2020

Registered in Merimen: 21/07/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SHA 6992Y

Claim No. :

Name of Insured : COMFORT TRANSPORTATION PTE LTD

Policy No. :

Insured Tel No. : HP:

Make / Model :

Excess Sec II : S\$

D.O.A : 18/07/2020

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. :

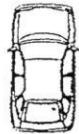
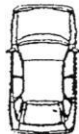
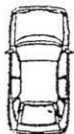
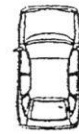
(V/L: ☒ YES / NO)

Insured Liability :

%

Final ? Yes / No

SMM 4850P

INSRS:
WSP: SNG AH TEE
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date / Time	STAGE	DATE / PIC
	SMM 4850P : X	
	SHA 6992Y : CS/ICS19011746/K1qd3s2 ; DOA : 29/06/2019	
	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:	☐
28/05/2021	Pls refer to Views for details.	
PRELIMINARY ADVICE Date/Time: Sent By:		
FINALIZATION Date/Time: Confirm with: Confirm by:		
Repair Cost: P/P	S\$ 430.00 (2 days) Reduction: 72 %	Email ☐ Call ☐
FINAL SETTLEMENT Date/Time: 28/05/2021 Confirm with Janice Email ☒ Call ☐		
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S\$ 460.10	
Loss of Rental (LOR):	S\$ (days)	
Loss of Use (LOU):	S\$ 120.00 (\$ 60 x 2 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: \$350.00
Total:	S\$ 587.55 Global Sum S\$:	
FINAL PAYMENT Date/Time: Confirm with: Email ☒ Call ☐		
Payee 1:	S\$ 587.55 Name 1: SNG AH TEE MOTOR & PANEL SERVICE PTE LTD	
Payee 2: (Strike if N.A.)	S\$ Name 2:	
Payee 3: (Strike if N.A.)	S\$ Name 3:	