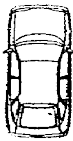


ASSIGNMENT

Surveyor: _____

DOI: _____

Date / Time : **24/07/2020**Registered in Merimen: **26/07/2020****Pre-assign / CCU / FTE**Insured Vehicle No. : **SHC 8985U**

Claim No. : _____

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

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **22/07/2020**

Place of Accident : _____

Is driver the owner? (YES / NO)

Nature of Accident : _____

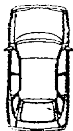
If **NO**, Driver Name / Age :

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. :

(V/L: YES / NO)

Insured Liability : %

Final ? Yes / No**SMT 5325X**INSRS:
WSP: **KAH MOTOR**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SMT 5325X - X	STAGE	DATE / PIC
	SHC 8985U - CC3/AXA12015662/H1ec3f1 ; 07/08/2012	Non-Reporting ltr (1st):	
	CC6/III16018846/Aha3q2 ; 04/10/2016	Non-Reporting ltr (2nd):	
	CS/III18018288/Atd3n2 ; 07/10/2018	Non-Reporting ltr (Final):	
	NS/INC10013167/Dr1 ; 03/07/2010	Notification ltr (if non-pickup):	
	NS/INC13007047/M1y1k3 ; 09/04/2013	Call OI:	
		After call ltr to OI:	
24/12/2020	Pls refer to VIEWS for details.	Documentation Check List:	Handler Typist
		Notification ltr (if non-pickup)	☐ ☐
		After call ltr to OI:	☐ ☐
	*Final repair cost different of 1 Cemnts due to GST issue.	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\$ 7,774.44 (7 days) Reduction: 18 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 24/12/2020 Confirm with Desmond	Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 15	If NO or B 28, Ass. Lia :	
Repair Cost: w/GST	S\$ 8,318.64		
Loss of Rental (LOR):	S\$ _____ (_____ days)		
Loss of Use (LOU):	S\$ 600.00 (\$ 60 x 10 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\$ _____		
Disbursement:	S\$ _____ (e.g. Tow/ Independent)		
Legal Cost	S\$ _____		
Total:	S\$ 8,918.64	Global Sum S\$:	
FINAL PAYMENT	Date/Time: _____	Confirm with: _____	Email ☒ Call ☐
Payee 1:	S\$ 8,918.64	Name 1: Kah Motor Co Sdn Bhd	
Payee 2: (Strike if N.A.)	S\$ _____	Name 2: _____	
Payee 3: (Strike if N.A.)	S\$ _____	Name 3: _____	

1) Claim status: Normal/~~Reject/Private Settle~~2) Report Format: **TP**3) Survey fee: **\$350.00**