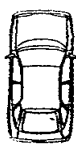


ASSIGNMENTSurveyor: **BRYAN**

DOI: _____

Date / Time : **05/08/2020**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **SHD 6859J**Claim No. : **D20003054MFSH**Name of Insured : **COMFORT TRANSPORTATION PTE LTD**Policy No. : **D-20094922MFSH**

Insured Tel No. : _____ HP: _____

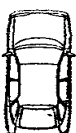
Make / Model : **HYUNDAI I40****Excess Sec II : \$** _____ D.O.A : **03/08/2020**Place of Accident : **CTE TWDS CITY BEFORE BRADDELL EXIT**

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

If NO, Driver Name / Age : **WONG MENG DONG**

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

Driver Tel No. : _____ (V/L: YES / NO)

Insured Liability : _____ % **Final ? Yes / No****SKT 2961C**INSRS:
WSP: **GOH LEE HWA**
Tel : **AUTOMOBILE**
Liability: **PTE LTD**
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SKT 2961C - CC3/AIG17009749/H1hg3q2 ; 17/05/2017	STAGE	DATE / PIC
	CS/MSG19014128/Dtd3e2 ; 11/08/2019	Non-Reporting ltr (1st):	
	NA/MSG20007924/z4 ; 11/08/2019	Non-Reporting ltr (2nd):	
	SHD 6859J - CC3/AIG15017834/H1jb3n2 ; 17/10/2015	Non-Reporting ltr (Final):	
	CS/FCI18013646/Kqd3n2 ; 24/07/2018	Notification ltr (if non-pickup):	
	CS/FCI19007261/Asd3n2 ; 21/04/2019	Call OI:	
	NS/INC18010232/K1vbn2 ; 05/06/2018	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\$ 6,500.00 (5 days) Reduction: 61 %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 14/09/2020 Confirm with Alfred	Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 6,500.00		
Loss of Rental (LOR):	S\$ 1,080.00 (9 days) x \$120		
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: \$600	
Total:	S\$ 7,580.00	Global Sum S\$:	
FINAL PAYMENT	Date/Time: _____ Confirm with: _____	Email ☐ Call ☐	
Payee 1:	S\$ 7,580.00	Name 1: Goh Lee Hwa Automobile Pte Ltd	
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	