

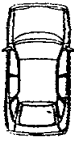
ASSIGNMENT

Surveyor: STEVE

DOI: 03.09.2020

Date / Time : 03.09.2020

Registered in Merimen: 03.09.2020

Pre-assign / CCU / FTE

Insured Vehicle No. : SHC 2012S

Claim No. : MCT20080491

Name of Insured : COMFORT TRANSPORTATION PTE LTD

Policy No. : MCOM0015

Insured Tel No. : HP:

Make / Model :

Excess Sec II :S\$ D.O.A : 31/08/2020 21:45

Place of Accident : BUANGKOK GREEN TWDS
SENGKANG EAST RD

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

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

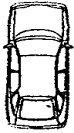
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. :

(V/L: YES / NO)

Insured Liability :	%	Final ? Yes / No
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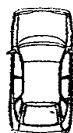
FBN 799G



INRS:
WSP: **My Car**
Tel : **Consultant**
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time				
	FBN 799G SHC 2012S NA/MSG20009298/z4 ; 31.08.2020 - CS/III18001860/Avd3n2; 25.01.2018		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: ☐ ☐	
PRELIMINARY ADVICE Date/Time:			Sent By: Post-Repair Photos: ☐ ☐	
			Others: ☐ ☐	
FINALIZATION Date/Time:			Confirm with: Confirm by: CTY	
Repair Cost: L/S S\$ 2,300.00 (3 days) Reduction: 73 %			Email ☐ Call ☐	
FINAL SETTLEMENT Date/Time: 16.09.21 Confirm with HUIQIN			Email ☐ Call ☐	
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27			If NO or B 28, Ass. Lia :	
Repair Cost: w/GST S\$ 2,461.00			OID REAR ENDED TP	
Loss of Rental (LOR): S\$ - (days)				
Loss of Use (LOU): S\$ 120.00 (\$ 30 x 4 days)				
Loss of Income (LOI): S\$ - (\$ x days)				
LOR only ☐ LOU only ☒ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]				
GIA/LTA Search S\$ 7.49				
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	
Total: S\$ 2,588.49 Global Sum S\$:				
FINAL PAYMENT Date/Time: 16.09.21 Confirm with: HUIQIN			Email ☐ Call ☐	
Payee 1: S\$ 2,588.49			Name 1: MY CAR CONSULTANT PTE LTD	
Payee 2: (Strike if N.A.) S\$			Name 2:	
Payee 3: (Strike if N.A.) S\$			Name 3:	