

ASSIGNMENT

CC4/FCI20010234/Epa3q2

Surveyor: STEVE

DOI:

Date / Time : 23/09/2020

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : SHD 3169L

Claim No. : D20003847MFSH

Name of Insured : COMFORT TRANSPORTATION PTE LTD

Policy No. : D-20094922MFSH

Insured Tel No. : HP: —

Make / Model : —

Excess Sec II : \$

D.O.A : 19/09/2020 18:45

Place of Accident : SERANGOON RD X STURDEE RD NTH

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

If NO, Driver Name / Age : LEE CHI KHIN

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

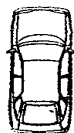
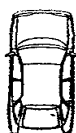
Driver Tel No. : —

(V/L: YES / NO)

Insured Liability : %

Final ? Yes / No

GBJ 4485G


 INSRs:
 WSP: EFFICIENT MOTOR & ENGINEERING WORKS PTE LTD
 Tel :
 Liability :
 RMKS:

 INSRs:
 WSP:
 Tel :
 Liability :
 RMKS:

 INSRs:
 WSP:
 Tel :
 Liability :
 RMKS:

 INSRs:
 WSP:
 Tel :
 Liability :
 RMKS:

Date/ Time		
	GBJ 4485G - X	STAGE
	SHD 3169L - CC3/AIG11003166/Dn1b3k2 ; 14/02/2011	DATE / PIC
	CC3/AIG17011473/M1hb3q2 ; 10/06/2017	Non-Reporting ltr (1st):
	CC4/AXA10021528/Dq1vk2 ; 24/10/2010	Non-Reporting ltr (2nd):
	CC4/FCI20005981/R1ka3q2 ; 25/05/2020	Non-Reporting ltr (Final):
	CS/FCI18021890/Usbe2 ; 23/11/2018	Notification ltr (if non-pickup):
	CS3/FCI19008779/Gcd3s2 ; 13/05/2019	Call OI:
	NA/INC18021269/h4 ; 23/11/2018	After call ltr to OI:
	NJA/MSI10009550/j1 ; 17/05/2010	Documentation Check List: Handler Typist
	NS/INC15003279/H1vbd1 ; 23/02/2015	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:
20/01/2021	Pls refer to VIEWS for details.	

PRELIMINARY ADVICE Date/Time: Sent By:		Post-Repair Photos: Others:	
FINALIZATION Date/Time: Confirm with: Confirm by:		Email: Call:	
Repair Cost: P/P	S\$ 4,799.33 (5 days) Reduction: 49 %	Email: Call:	
FINAL SETTLEMENT Date/Time: 20/01/2021 Confirm with: Jessie		Email: Call:	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :	
Repair Cost: w/GST	S\$ 5,135.28		
Loss of Rental (LOR):	S\$ (days)		
Loss of Use (LOU):	S\$ 350.00 (\$ 70 x 5 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: \$350.00	
Total:	S\$ 5,485.28	Global Sum S\$:	
FINAL PAYMENT Date/Time: Confirm with:		Email: Call:	
Payee 1:	S\$ 5,485.28	Name 1:	EFFICIENT MOTOR & ENGINEERING WORKS PTE LTD
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	