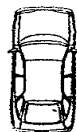


ASSIGNMENTSurveyor: **STEVE**DOI: **05/10/2020**Date / Time : **05/10/2020**Registered in Merimen: **—****Pre-assign / CCU / FTE**Insured Vehicle No. : **GW 5387Y**Claim No. : **—**Name of Insured : **ABWIN LEASING PTE LTD**Policy No. : **—**Insured Tel No. : **—** HP: **—**Make / Model : **—****Excess Sec II :S\$** **—** D.O.A : **02/10/2020**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)** NODriver Tel No. : **—** (V/L **(YES)** NO)Insured Liability : **—** % **Final ? Yes / No****SHC 7774T**INSRS:
WSP: COMFORTDELGRO
Tel : (LOYANG)
Liability : **—**
RMKS: **—**INSRS:
WSP:
Tel : **—**
Liability : **—**
RMKS: **—**INSRS:
WSP:
Tel : **—**
Liability : **—**
RMKS: **—**INSRS:
WSP:
Tel : **—**
Liability : **—**
RMKS: **—**

Date/ Time		
	SHC 7774T : X	STAGE
	GW 5387Y : CS/INC10009898/Kfg1 ; DOA : 06/04/2010	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: P/P	S\$ 1,091.00 (2 days) Reduction: 36 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 18.11.20 Confirm with CATHERINE	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia : —
Repair Cost: w/GST	S\$ 1,167.37 OID REVERSED HIT	TP PARKED VEHICLE
Loss of Rental (LOR):	S\$ 500.76 (4 days) x \$125.19	
Loss of Use (LOU):	S\$ - (\$ x days)	
Loss of Income (LOI):	S\$ 200.00 (\$ 50 x 4 days)	
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LO ☒	[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: \$400
Total:	S\$ 1,875.62	Global Sum S\$: 1,870.00
FINAL PAYMENT	Date/Time: 18.11.20 Confirm with: CATHERINE	Email ☐ Call ☐
Payee 1:	S\$ 1,870.00 Name 1: COMFORTDELGRO ENGINEERING PTE LTD	
Payee 2: (Strike if N.A.)	S\$ — Name 2: —	
Payee 3: (Strike if N.A.)	S\$ — Name 3: —	