15/5/2010

INS. CASE OWNER: CC4/AIG20011274/Epa3

LKK:

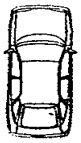
IDAC:

ASSIGNMENT

Surveyor: STEVE DOI: 19/10/2020 Date / Time : 19/10/2020

Registered in Merimen: 19/10/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SMR 5700G Claim No. : 9530975625SG

Name of Insured : Policy No. : 2000003102

Insured Tel No. : HP: Make / Model :

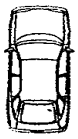
Excess Sec II :S$ D.O.A : 17/10/2020 08:00 Place of Accident : NORTH BUONA VISTA RD X HOLLAND DR

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

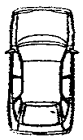
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

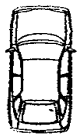
SHA 4535Y → → →



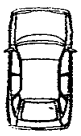
INSRS:
WSP: CDGE
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SHA 4535Y - CC3/AIG18008996/K1ea3q2 - 15/05/2018 CS/MSG15021306/H1gbn2 - 12/12/2015	**STAGE** **DATE / PIC**
		Non-Reporting ltr (1st):
		Non-Reporting ltr (2nd):
	SMR 5700G - X	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:
Repair Cost: P/P	S$ 1,390.00 (2 days) Reduction: 82 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 01/12/2021 Confirm with KAZALI		Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL		If NO or B 28, Ass. Lia :
Repair Cost:	S$ 1,487.30		
Loss of Rental (LOR):	S$ 332.01 (3 days) x $110.67		
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ 150.00 ($ 50 x 3 days)		
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☑ [**Tick only one**]			
GIA/LTA Search	S$ 2.00		
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: 320.00
Total:	**S$** 1,971.31	**Global Sum S$:**	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 1,971.31	Name 1:	ComfortDelGro Engineering Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	