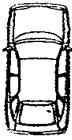
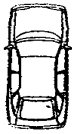
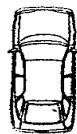
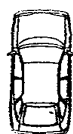


ASSIGNMENTSurveyor: **STEVE**DOI: **20/10/2020**Date / Time : **19/10/2020**Registered in Merimen: **—****Pre-assign / CCU / FTE**Insured Vehicle No. : **SLU 2070G**Claim No. : **—**Name of Insured : **KOH POH LYE**Policy No. : **—**Insured Tel No. : **—** HP: **—**Make / Model : **—****Excess Sec II :S\$** **—** D.O.A : **17/10/2020**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****SHD 6937S**INSRS:
WSP: COMFORTDELGRO
Tel : (LOYANG)
Liability : **—**
RMKS: **—**INSRS:
WSP:
Tel : **—**
Liability : **—**
RMKS: **—**INSRS:
WSP:
Tel : **—**
Liability : **—**
RMKS: **—**INSRS:
WSP:
Tel : **—**
Liability : **—**
RMKS: **—**

Date/ Time		
	SHD 6937S : CC4/FCI20010111/Aea3 ; DOA : 16/09/2020	STAGE
	SLU 2070G : CS/LPC20011369/Utf3 ; DOA : 17/10/2020	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 ☐ ☐
20/05/2021	SETTLED AND CLOSED / NO PHY FILE	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: L/S	S\$ 3,050.00 (2 days) Reduction: 29.96 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 26/04/2021 Confirm with SABINA	Email ☒ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia : —
Repair Cost: (W/GST)	S\$ 3,263.50	
Loss of Rental (LOR):	S\$ 498.02 (4.5 days) X \$110.67	OI turning out from condo.
Loss of Use (LOU):	S\$ — (\$ — x — days)	
Loss of Income (LOI):	S\$ 225.00 (\$ 50 x 4.5 days)	
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LO ☒ [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: \$400.00
Total:	S\$ 3,988.52 Global Sum S\$: 3,900.00	
FINAL PAYMENT	Date/Time: — Confirm with: —	Email ☐ Call ☐
Payee 1:	S\$ 3,900.00 Name 1: COMFORTDELGRO ENGINEERING PTE LTD	
Payee 2: (Strike if N.A.)	S\$ — Name 2: —	
Payee 3: (Strike if N.A.)	S\$ — Name 3: —	