

ASSIGNMENT

Surveyor:

ADRIAN

DOI: 03/11/2020

Date / Time : 29/10/2020

Registered in Merimen: _____

Pre-assign / CCU / FTE

Insured Vehicle No. : SHA 1640X

Claim No. : D20004384MFSH

Name of Insured : COMFORT TRANSPORTATION PTE LTD

Policy No. : D-20094922MFSH

Insured Tel No. : _____ HP: _____

Make / Model : HYUNDAI I40

Excess Sec II :\$_____ D.O.A : 24/10/2020 08:45

Place of Accident : JURONG EAST STREET 21 BLK 213
OPEN CARPARK

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

If NO, Driver Name / Age : SIM WEE POH

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

Driver Tel No. : _____

(V/L: YES / NO)

Insured Liability : _____ %

Final ? Yes / No

SLR 9PINSRS:
WSP: TWINCAR
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SLR 9P - X		
	SHA 1640X - CC3/AIG13000275/H1q2t2y ; 30/12/2012	Non-Reporting ltr (1st):	
	CC3/AIG15010500/H1na3s2 ; 21/06/2015	Non-Reporting ltr (2nd):	
	CC3/LCR17005564/H1ya3q2 ; 19/03/2017	Non-Reporting ltr (Final):	
	CC3/LCR18001606/K1ws3q2 ; 25/01/2018	Notification ltr (if non-pickup):	
	CS/FCI12019125/Ay1d1 ; 28/09/2012	Call OI:	
	CS/TMI13009124/M1y1d1 ; 18/05/2013	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\$ 2689.90 (3 days) Reduction: 1296.98 % 33	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 29/04/2021 Confirm with MELODY	Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 23	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 2,878.19 W/GST		
Loss of Rental (LOR):	S\$ 428.00 (4 days) x \$107.00		
Loss of Use (LOU):	S\$ 160.00 (\$ 80 x 2 days)		
Loss of Income (LOI):	S\$ (\$ x days)		
LOR only ☐ LOU only ☐ LOR + LOU ☒ LOR + LOI ☐ [Tick only one]			
GIA/LTA Search	S\$ 7.45		
Medical:	S\$	1) Claim status: ☒ Normal/Reject/Private Settle	
Disbursement:	S\$ 200.00 COATING FEE (e.g. Tow/ Independent)	2) Report Format: TP	
Legal Cost	S\$	3) Survey fee: \$350.00	
Total:	S\$ 3,673.64 Global Sum S\$:		
FINAL PAYMENT	Date/Time: _____ Confirm with: _____	Email ☒ Call ☐	
Payee 1:	S\$ 3,673.64 Name 1: TWINCAR AUTOMOTIVE PTE LTD		
Payee 2: (Strike if N.A.)	S\$ Name 2:		
Payee 3: (Strike if N.A.)	S\$ Name 3:		