LKK:
IDAC:

INS. CASE OWNER:

CC4/III20012081/Eps3

ASSIGNMENT

Surveyor: __STEVE__ DOI: __09/11/2020__ Date / Time : __04/11/2020__

Registered in Merimen: __04/11/2020__

Pre-assign / CCU / FTE

Insured Vehicle No. : __SH 6592B__ Claim No. : _____

Name of Insured : COMFORT TRANSPORTATION PTE LTD Policy No. : _____

Insured Tel No. : _____ HP: _____ Make / Model : _____

Excess Sec II :S$ _____ D.O.A : __30/10/2020__ 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)/ NO

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

__SBS 6536H__ ⟶ _____ ⟶ _____ ⟶ _____

INSRS: WSP: LEXBUILD Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time			
	SBS 6536H : X	**STAGE**	**DATE / PIC**
	SH 6592B : CC3/AIG17021695/M1ka3q2 ; DOA : 11/11/2017	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: ____

Repair Cost: P/P S$ 10,227.39 (4 days) Reduction: 51 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 30/11/2020 Confirm with SHIRLEY Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NA	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 10,943.31	
Loss of Rental (LOR):	S$ (days)	
Loss of Use (LOU):	S$1,000.00 ($250 x 4 days)	
Loss of Income (LOI):	S$ ($ x days)	
LOR only ☐ LOU only ☑ LOR + LOU ☐ LOR + LO ☐ [**Tick only one**]		
GIA/LTA Search	S$ 7.45	
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: 600.00
Total:	S$ 11,950.76 **Global Sum S$:**	

FINAL PAYMENT Date/Time: ____ Confirm with: ____ Email ☐ Cal ☐

Payee 1:	S$ 11,950.76	Name 1:	LEXBUILD INTERNATIONAL PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	