15/5/2010

INS. CASE OWNER: CC6/III20012355/Aba3

LKK:

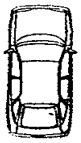
IDAC:

ASSIGNMENT

Surveyor: ADRIAN DOI: 10/11/2020 Date / Time : 10/11/2020

Registered in Merimen: 11/11/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SHD 4571B Claim No. :

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

Insured Tel No. : HP: Make / Model :

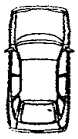
Excess Sec II :S$ D.O.A : 07/11/2020 14:25 Place of Accident : ARTILLERY AVE ROUNDABOUT

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

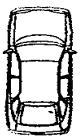
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

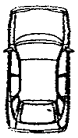
SLJ 8458R → → →



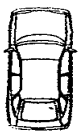
INSRS:
WSP: CN MOTORS
Tel : PTE LTD
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SLJ 8458R - X	**STAGE** **DATE / PIC**
	SHD 4571B - CC3/III19001335/R1gb3q2 ; 18/01/2019	Non-Reporting ltr (1st):
	CC4/III19004141/Dwa3q2 ; 04/03/2019	Non-Reporting ltr (2nd):
	NA/INC18018599/z4 ; 13/10/2018	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:
13/01/2021	SETTLED AND CLOSED / NO PHY FILE	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: L/S	S$ 7,800.00 (6 days) Reduction: 63.70 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 12/01/2021	Confirm with Mrs Yau	Email ✓ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 15	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 7,800.00		
Loss of Rental (LOR):	S$ (days)		OID CHANGED LANE
Loss of Use (LOU):	S$ 800.00 ($100 x 8 days)		
Loss of Income (LOI):	S$ ($ 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$ (e.g. Tow/ Independent)		2) Report Format: TP
Legal Cost	S$		3) Survey fee: $600.00
Total:	**S$** 8,607.45	**Global Sum S$:** 8,600.00	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 8,600.00	Name 1:	CN MOTORS PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	