15/5/2010

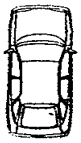
INS. CASE OWNER: CHRIS LIM | CC4/FCI20012362/Gra3 | LKK: IDAC:

ASSIGNMENT

Surveyor: GUO QIANG DOI: Date / Time : 11.11.2020

Registered in Merimen: ---

Pre-assign / CCU / FTE



Insured Vehicle No. : SHC 8477U Claim No. : D20004562MFSH

Name of Insured : COMFORT TRANSPORTATION PTE LTD Policy No. : D-20094922MFSH

Insured Tel No. : HP: Make / Model : HYUNDAI I40

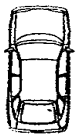
Excess Sec II :S$ D.O.A : 07/11/2020 10:10 Place of Accident : ALONG TPE BEFORE TAMPINES LINK EXIT

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

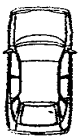
If **NO**, Driver Name / Age : MOHD NASIR B MD AZAM OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

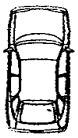
XD 8401T → → →



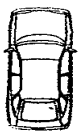
INSRS:
WSP: COMPLETE
Tel : VMS
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	XD 8401T - CC4/AIG19021216/R1hs3q2 - 30/11/2019	**STAGE** **DATE / PIC**
	CC3/AXA11011063/H1q1dk2 - 07/06/2011	Non-Reporting ltr (1st):
	SHC 8477U - CC3/AXA13012846/M1hy3w2 - 15/07/2013	Non-Reporting ltr (2nd):
	CC4/FCI20006132/Qka3 - 01/06/2020	Non-Reporting ltr (Final):
	CS/FCI18016809/Ksbe2 - 12/09/2018	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$ 43,000.00 (3 days) Reduction: 32 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 19/01/2021	Confirm with DARREN	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 46,010.00		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 600.00 ($150 x 4 days)		
Loss of Income (LOI):	S$ ($ 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$** 46,617.45	**Global Sum S$:** 46,600.00	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 46,600.00	Name 1:	Complete VMS Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	