15/5/2010

INS. CASE OWNER: CC4/AIG20013525/T1ba3

LKK:

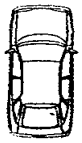
IDAC:

ASSIGNMENT

Surveyor: TAUFIKH DOI: 08/12/2020 Date / Time : 08/12/2020

Registered in Merimen: 08/12/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SDH 1128U Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

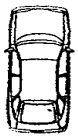
Excess Sec II :S$ D.O.A : 08/12/2020 09:20 Place of Accident : KEONG SAIK ROAD

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

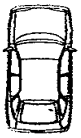
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

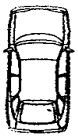
SHC 8101D → → →



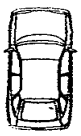
INSRS:
WSP: CDGE
Tel : LOYANG
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SHC 8101D - CC3/AIG13021577/Yv1a3w2 ; 13/11/2013	Non-Reporting ltr (1st):	
	CC3/CTI17010063/K1za3n2 ; 20/05/2017	Non-Reporting ltr (2nd):	
	CC4/III18005012/Dwa3q2 ; 13/03/2018	Non-Reporting ltr (Final):	
	NS/INC11008819/H1vn ; 10/05/2011	Notification ltr (if non-pickup):	
	SDH 1128U - X	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: MTH
Repair Cost: L/S	S$ 1,850.00 (2 days)	Reduction: 59 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 12.08.21	Confirm with KAZALI	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 15	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 1,979.50	OI CHANGED LANE HIT TP	
Loss of Rental (LOR):	S$ 276.68 (2.5 days)	X $110.67	
Loss of Use (LOU):	S$ - ($ x days)		
Loss of Income (LOI):	S$ 125.00 ($ 50 x 2.5 days)		
LOR only ☐ LOU only ☐	LOR + LOU ☐ LOR + LOI ☑	[**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: $320
Total:	**S$** 2,383.18	**Global Sum S$:** 2,380.00	

FINAL PAYMENT	Date/Time: 12.08.21	Confirm with: KAZALI	Email ☐ Call ☐
Payee 1:	S$ 2,380.00	Name 1:	COMFORTDELGRO ENGINEERING PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	