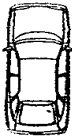


ASSIGNMENT

Surveyor:

NAZ

DOI:

11/12/2020Date / Time : **11/12/2020**Registered in Merimen: **11/12/2020****Pre-assign / CCU / FTE**Insured Vehicle No. : **SMU 3588L**

Claim No. : _____

Name of Insured : **KOH KUAN CHIEN**

Policy No. : _____

Insured Tel No. : _____ HP: _____

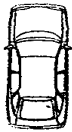
Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **11/12/2020**

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 / NODriver Tel No. : _____ (V/L: ☒ YES / NO)Insured Liability : _____ % **Final ? Yes / No****SHC 3153L**INSRS:
WSP: COMFORTDELGRO
Tel : (LOYANG)
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SHC 3153L : CC4/III18000161/T1jb3q2 ; DOA : 29/12/2017		STAGE	DATE / PIC
	SMU 3588L : X		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
			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\$ \$2,776.76	(3 days) Reduction: 925.12 % 25	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 16/09/2021	Confirm with KAZALI	Email ☒ Call ☐	
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 2,971.13	W/GST		
Loss of Rental (LOR):	S\$ 625.95	(5 days) 2,971.13 x \$125.19	(OI DRIVE STRAIGHT ON LEFT TURN LANE ONLY)	
Loss of Use (LOU):	S\$ _____	(\$ _____ x 5 days)		
Loss of Income (LOI):	S\$ 250.00	(\$ 50 x 5 days)		
LOR only ☐ LOU only ☐ LOR + LOU ☐		LOR + LOU ☒ [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: \$320.00	
Total:	S\$ 3,849.08	Global Sum S\$:		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒ Call ☐	
Payee 1:	S\$ 3,849.08	Name 1: COMFORTDELGRO ENGINEERING PTE LTD		
Payee 2: (Strike if N.A.)	S\$ _____	Name 2:		
Payee 3: (Strike if N.A.)	S\$ _____	Name 3:		