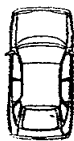


ASSIGNMENTSurveyor: **TAUFIKH**DOI: **22/12/2020**Date / Time : **22/12/2020**Registered in Merimen: **22/12/2020****Pre-assign / CCU / FTE**Insured Vehicle No. : **SML 4408P**

Claim No. :

Name of Insured : **SONAM RATANKUMAR CHUGANI**Policy No. : **1900091739**

Insured Tel No. : _____ HP: _____

Make / Model : **KIA CERATO****Excess Sec II : \$** _____ D.O.A : **21/12/2020 11:52**Place of Accident : **20 Loyang Way, Singapore 508774**

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

OUTSIDE TUA PEK KONG TEMPLE

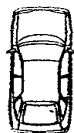
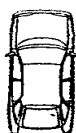
If NO, Driver Name / Age :

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. :

(V/L: YES / NO)

Insured Liability : %

Final ? Yes / No**SHC 153G**INSRS: **CDGE**
WSP: **LOYANG**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SHC 153G - CC3/AIG14019476/H1pm3w2 ; 13/10/2014	STAGE	DATE / PIC
	CC3/FCI15005656/Kqbk3 ; 14/12/2014	Non-Reporting ltr (1st):	
	CC6/FCI20002759/Uda3q2 ; 05/02/2020	Non-Reporting ltr (2nd):	
	CS3/FCI20002772/Es3e2 ; 10/02/2020	Non-Reporting ltr (Final):	
	SML 4408P - X	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\$ 1,947.36	(3 days) Reduction: \$3,981.48 % 67	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 15/12/2021	Confirm with KAZALI	Email ☒ Call ☐
Final Liability:	% 50	(Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :
Repair Cost: 2,083.68	S\$ 1,041.84	W/GST	
Loss of Rental (LOR): 500.76	S\$ 250.38	(4 days) x125.19	TP OVERTAKE 3RD VEHICLE (VAN) FROM THE RIGHT (STRADDLING BOTH LANE), OI MOVING OUT FROM STATIONARY POSITION COLLIDE ONTO EACH OTHER.
Loss of Use (LOU):	S\$	(\$ x days)	
Loss of Income (LOI): 200	S\$ 100.00	(\$ 50 x 4 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: \$320.00
Total:	S\$ 1,394.22	Global Sum S\$: 1,390.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒ Call ☐
Payee 1:	S\$ 1,390.00	Name 1: COMFORTDELGRO ENGINEERING PTE LTD	
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	