

ASSIGNMENTSurveyor: XING GUO QIANGDOI: 04/01/2021Date / Time : 24.12.2020Registered in Merimen: 24/12/2020**Pre-assign / CCU / FTE**Insured Vehicle No. : SHA 7022RClaim No. : MCT20120475Name of Insured : COMFORT TRANSPORTATION PTE LTDPolicy No. : MCOM0015

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : \$ _____ D.O.A : 23/12/2020 17:50

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 / NO

Driver Tel No. : _____ (V/L: YES / NO)

Insured Liability : _____ % **Final ? Yes / No****SMV 3775H**INSRS:
WSP:
Tel : PERFORMANCE
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SMV 3775H - X		
	SHA 7022R - CC3/III18012945/Kfb3q2 ; 08/07/2018	Non-Reporting ltr (1st):	
	CC4/III20003325/Kgs3q2 ; 23/02/2020	Non-Reporting ltr (2nd):	
	NA/INC09022969/r ; 12/10/2009	Non-Reporting ltr (Final):	
	NS/INC09023063/Cg1 ; 12/10/2009	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:	☐ ☐
		Post-Repair Photos:	☐ ☐
		Others:	☐ ☐
PRELIMINARY ADVICE	Date/Time: _____ Sent By: _____		
FINALIZATION	Date/Time: _____ Confirm with: _____ Confirm by: _____		
Repair Cost: P/P	S\$ 15,411.65 (6 days) Reduction: 26 %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 17/06/2021 Confirm with PML	Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :	
Repair Cost: w/GST	S\$ 16,490.47		
Loss of Rental (LOR):	S\$ 360.00 (4 days) x \$90		
Loss of Use (LOU):	S\$ (\$ x days)		
Loss of Income (LOI):	S\$ (\$ x days)		
LOR only ☒ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]			
GIA/LTA Search	S\$		
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\$ 16,850.47 Global Sum S\$:		
FINAL PAYMENT	Date/Time: _____ Confirm with: _____ Email ☒ Call ☐		
Payee 1:	S\$ 16,850.47 Name 1: Performance Motors Limited		
Payee 2: (Strike if N.A.)	S\$ Name 2:		
Payee 3: (Strike if N.A.)	S\$ Name 3:		