

ASSIGNMENTSurveyor: XGQDOI: 14/01/2021Date / Time : 19/01/2021Registered in Merimen: —**Pre-assign / CCU / FTE**Insured Vehicle No. : SJW 1332XClaim No. : Name of Insured : NG KIAN JOOPolicy No. : Insured Tel No. : HP: Make / Model : **Excess Sec II :S\$** D.O.A : 13/01/2021Place 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**SH 9703D → → → INSRS:
WSP: COMFORTDELGRO
Tel : (LOYANG)
Liability :
RMKS: INSRS:
WSP:
Tel :
Liability :
RMKS: INSRS:
WSP:
Tel :
Liability :
RMKS: INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SH 9703D : CS/TMI15010812/H1gy3q2 ; DOA : 29/06/2015	STAGE DATE / PIC
	SJW 1332X : 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 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: <u> </u> Sent By: <u> </u>	Post-Repair Photos: ☐ ☐
		Others: ☐ ☐
FINALIZATION	Date/Time: <u> </u> Confirm with: <u> </u>	Confirm by: <u>XGQ</u>
Repair Cost: <u>L/S</u> S\$ <u>1,550.00</u> (<u>2</u> days) Reduction: <u>33</u> %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: <u>02.03.21</u> Confirm with: <u>CATHERINE</u>	Email ☐ Call ☐
Final Liability: <u>% 100</u> (Agreed / Assessed) BOLA S/N No. : <u>27</u>		If NO or B 28, Ass. Lia : <u> </u>
Repair Cost: <u>w/GST</u> S\$ <u>1,658.50</u> <u>OI REAR ENDED TP</u>		
Loss of Rental (LOR): S\$ <u>229.90</u> (<u>2</u> days) <u>X \$114.95</u>		
Loss of Use (LOU): S\$ <u>-</u> (\$ <u>x</u> days)		
Loss of Income (LOI): S\$ <u>100.00</u> (\$ <u>50</u> x <u>2</u> days)		
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LO ☒ [Tick only one]		
GIA/LTA Search S\$ <u>2.00</u>		
Medical: S\$ <u>-</u>		1) Claim status: Normal/ Reject/Private Settle
Disbursement: S\$ <u>-</u> (e.g. Tow/ Independent)		2) Report Format: <u>TP</u>
Legal Cost S\$ <u>-</u>		3) Survey fee: <u>\$400</u>
Total: S\$ <u>1,990.40</u> Global Sum S\$: <u>1,990.00</u>		
FINAL PAYMENT	Date/Time: <u>02.03.21</u> Confirm with: <u>CATHERINE</u>	Email ☐ Call ☐
Payee 1: S\$ <u>1,990.00</u> Name 1: <u>COMFORTDELGRO ENGINEERING PTE LTD</u>		
Payee 2: (Strike if N.A.) S\$ <u> </u> Name 2: <u> </u>		
Payee 3: (Strike if N.A.) S\$ <u> </u> Name 3: <u> </u>		