15/5/2010

INS. CASE OWNER: CHAN Kian Chuan 68805444

CC4/ASM21002615/Uga3

LKK:

IDAC: 200028

ASSIGNMENT

Surveyor: MARCUS

DOI: 02/03/2021

Date / Time : 25.02.2021

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : SHD 4749G

Claim No. : S1M033SP

Name of Insured : COMFORT TRANSPORTATION PTE LTD

Policy No. : P2420438

Insured Tel No. :

HP:

Make / Model : HYUNDAI IONIQ

Excess Sec II :S$

D.O.A : 03/02/2021 10:30

Place of Accident : JLN TOA PAYOH TO THOMSON RD

Is driver the owner? (YES / NO)

Nature of Accident :

If **NO**, Driver Name / Age : LIM ENG MENG

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

Driver Tel No. :

(V/L: YES / NO)

Insured Liability : %

Final ? Yes / No

SGS 1582Y → → →

INSRS:
WSP: 1st Auto Pro Pte Ltd
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SGS 1582Y - NA/CTI21001676/h4 ; 03.02.2021	Non-Reporting ltr (1st):	
	SHD 4749G - CC3/AIG15017761/H1yb3n2 ; 18/10/2015	Non-Reporting ltr (2nd):	
	CS/FCI18017719/T1vd3n2 ; 26/09/2018	Non-Reporting ltr (Final):	
	NS/INC13015912/Yvk3 ; 26/08/2013	Notification ltr (if non-pickup):	
	NS/INC15020769/H1vbn2 ; 02/12/2015	Call OI:	
	NS/INC17019353/K1vbn2 ; 05/10/2017	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: L/S S$ $2,650.00 (4 days) Reduction: $7,131.20 % 73 Email [ ] Call [ ]

FINAL SETTLEMENT Date/Time: 29/07/2021 Confirm with CHRISTINA Email [✓] Call [ ]

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 2,385.00 (AXA'S INSTRUCTION)	
Loss of Rental (LOR):	S$ 700.00 (7 days) x $100.00	
Loss of Use (LOU):	S$ ($ 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: $350.00
Total:	**S$** 3,085.00 **Global Sum S$:** $3,100.00 (AXA'S INSTRUCTION)	

FINAL PAYMENT Date/Time: Confirm with: Email [✓] Call [ ]

Payee 1:	S$ $3,100.00	Name 1:	1ST AUTO PRO PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	