

INS. CASE OWNER:

ASSIGNMENT

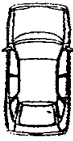
Surveyor:

ADRIAN

DOI: 05/03/2021

Date / Time : 04/03/2020

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **SH 8896L**Claim No. : **S1M034F1**Name of Insured : **COMFORT TRANSPORTATION PTE LTD**Policy No. : **P2419138**

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$D.O.A : **02/03/2021 17:20**Place of Accident : **Sengkang E Dr & Sengkang E Way**

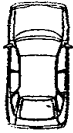
Is driver the owner? (YES / NO) Nature of Accident : _____

If NO, Driver Name / Age : **GOH BENG CHIN**

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

Driver Tel No. : _____

(V/L: YES / NO)

Insured Liability : % **Final ? Yes / No****PC 8622Y**INSRS:
WSP: **Xin Hua Workshop Pte Ltd**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	PC 8622Y - X	STAGE	DATE / PIC
	SH 8896L - CC4/FCI19021525/Dea3q2 ; 30/11/2019	Non-Reporting ltr (1st):	
	CC4/FCI20010925/Epa3q2 ; 07/10/2020	Non-Reporting ltr (2nd):	
	CS/FCI19011143/T1td3n2 ; 15/06/2019	Non-Reporting ltr (Final):	
	CS/FCI19013566/Kqf3n2 ; 05/07/2019	Notification ltr (if non-pickup):	
	NBA/INC19020117/Y ; 12/11/2019	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: L/S	S\$ 13,900.00 (10 days) Reduction: \$26,509.68 % 66	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 02/06/2021 Confirm with kerry	Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 5	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 14,873.00 W/GST		
Loss of Rental (LOR):	S\$ 1,820.00 (14 days) x \$130.00		
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\$ 7.45		
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\$ 16,700.45	Global Sum S\$:	
FINAL PAYMENT	Date/Time: _____ Confirm with: _____	Email ☒ Call ☐	
Payee 1:	S\$ 16,700.45 Name 1: XIN HUA WORKSHOP PTE LTD		
Payee 2: (Strike if N.A.)	S\$ Name 2:		
Payee 3: (Strike if N.A.)	S\$ Name 3:		