15/5/2010

INS. CASE OWNER:

CC4/AIG21003455/T1pa3

LKK:

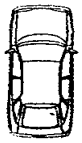
IDAC:

ASSIGNMENT

Surveyor: TAUFIKH DOI: 16/03/2021 Date / Time : 16/03/2021

Registered in Merimen: 16/03/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : GBF 1710Y Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

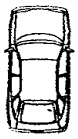
Excess Sec II :S$ D.O.A : 16.03.2021 10:50 Place of Accident :

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

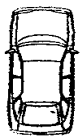
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

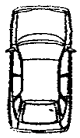
SH 8229M → → →



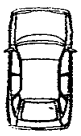
INSRS:
WSP: CDGE
Tel : LOYANG
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SH 8229M - CC3/AIG10005701/Fa2e2k2 ; 21/03/2010	Non-Reporting ltr (1st):	
	CC4/AXA15016481/H1wb3n2 ; 28/09/2015	Non-Reporting ltr (2nd):	
	CS/FCI13019447/Agbu2 ; 16/10/2013	Non-Reporting ltr (Final):	
	NS/INC13019588/H1vm3k3 ; 16/10/2013	Notification ltr (if non-pickup):	
	NS/INC20008664/T1vf3e2 ; 18/08/2020	Call OI:	
	GBF 1710Y- X	After call ltr to OI:	
29/06/2021	Pls refer to Views for details.	**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/sum	S$ 3,150.00 (2 days) Reduction: 26 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 29/06/2021	Confirm with Kazali	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 15		If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 3,370.50		
Loss of Rental (LOR):	S$ 221.34 (2 days) x $110.67		
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ 100.00 ($ 50 x 2 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: $320.00
Total:	**S$** 3,693.84	**Global Sum S$:** 3,690.00	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑	Call ☐
Payee 1:	S$ 3,690.00	Name 1:	ComfortDelGro Engineering Pte Ltd	
Payee 2: (Strike if N.A.)	S$	Name 2:		
Payee 3: (Strike if N.A.)	S$	Name 3:		