15/5/2010

INS. CASE OWNER:

CC4/ASM21003750/Ups3

LKK:

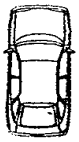
IDAC:

ASSIGNMENT

Surveyor: Marcus DOI: 23/03/2021 Date / Time : 23/03/2021

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : SHA 5745B Claim No. :

Name of Insured : COMFORT TRANSPORTATION PTE LTD Policy No. :

Insured Tel No. : HP: Make / Model :

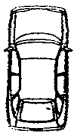
Excess Sec II :S$ D.O.A : 22/03/2021 Place of Accident :

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

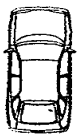
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

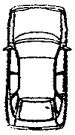
SLP 4546P → → →



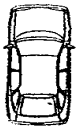
INSRS:
WSP: NINETEEN
Tel : AUTOWERKS
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SLP 4546P : X		
	SHA 5745B : CC4/III20006644/Qba3q2 ; DOA : 21/06/2020	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**
16/04/2021	Pls refer to VIEWS for details.	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$ 6,200.00	(6 days)	Reduction: 51	%	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 16/04/2021		Confirm with Jeremy		Email ☑ Cal ☐
Final Liability:	% 90	(Agreed / Assessed)	BOLA S/N No. : NIL		If NO or B 28, Ass. Lia :
Repair Cost: 6,200.00	S$ 5,580.00				
Loss of Rental (LOR): 910.00	S$ 819.00	(7 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 + LO ☐	[**Tick only one**]		
GIA/LTA Search	S$ 36.45				
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: $350.00
Total:	**S$** 6,435.45	**Global Sum S$:** 6,400.00			
FINAL PAYMENT	Date/Time:		Confirm with:		Email ☑ Cal ☐
Payee 1:	S$ 6,400.00	Name 1:	Nineteen Autowerks Pte Ltd		
Payee 2: (Strike if N.A.)	S$	Name 2:			
Payee 3: (Strike if N.A.)	S$	Name 3:			