15/5/2010

INS. CASE OWNER:

CC4/AIG21004359/T1ra3

LKK:

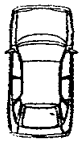
IDAC:

ASSIGNMENT

Surveyor: TAUFIKH DOI: 06/04/2021 Date / Time : 06/04/2021

Registered in Merimen: 06/04/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : SKR 8367P Claim No. :

Name of Insured : ONG GUAT LAY (WANG YUELI) Policy No. :

Insured Tel No. : HP: Make / Model :

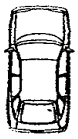
Excess Sec II :S$ D.O.A : 05/04/2021 09:20 Place of Accident : JUNCTION OF KOVAN ROAD AND FLOWER ROAD

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

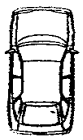
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

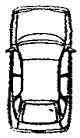
SHC 7938M → → →



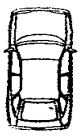
INSRS:
WSP: CDGE
Tel :
Liability : LOYANG
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SHC 7938M - CC3/TMI16010525/H1vbn2 ; 06/06/2016	Non-Reporting ltr (1st):	
	CI/TPD18018438/Zc ; 19/09/2018	Non-Reporting ltr (2nd):	
	CS/FCI19015671/Eyd3e2 ; 19/09/2018	Non-Reporting ltr (Final):	
	NS/INC16016130/H1vbn2 ; 24/08/2016	Notification ltr (if non-pickup):	
	SKR 8367P - X	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:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: P/P S$ 4,996.87 (2 days) Reduction: 24 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 07/01/2022 Confirm with JIM Email ☑ Call ☐

Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 8A If NO or B 28, Ass. Lia :

Repair Cost: S$ 5,346.65

Loss of Rental (LOR): S$ 252.94 (2 days) x $ 126.47

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$ 5,701.59** **Global Sum S$:**

FINAL PAYMENT Date/Time: Confirm with: Email ☐ Call ☐

Payee 1:	S$ 5,701.59	Name 1:	ComfortDelgro Engineering Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	