15/5/2010

INS. CASE OWNER: CC4/AIG21004610/T1pa3

LKK:

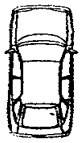
IDAC:

ASSIGNMENT

Surveyor: TAUFIKH DOI: 12/04/2021 Date / Time : 12/04/2021

Registered in Merimen: 12/04/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : SGD 6836L Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

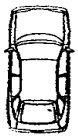
Excess Sec II :S$ D.O.A : 11.04.2021 19:10 Place of Accident :

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

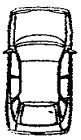
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

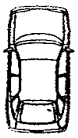
SHD 3169L → → →



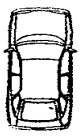
INSRS:
WSP: CDGE
Tel :
Liability : LOYANG
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SHD 3169L - CC3/AIG11003166/Dn1b3k2 ; 14/02/2011 CC3/AIG17011473/M1hb3q2 ; 10/06/2017 CC4/AXA10021528/Dq1vk2 ; 24/10/2010 CC4/FCI20005981/R1ka3q2 ; 25/05/2020 CC4/FCI20010234/Epa3q2 ; 19/09/2020 CS/FCI18021890/Usbe2 ; 23/11/2018 CS3/FCI19008779/Gcd3s2 ; 13/05/2019 NA/INC18021269/h4 ; 23/11/2018 NJA/MSI10009550/j1 ; 17/05/2010 NS/INC15003279/H1vbd1 ; 23/02/2015	
	SGD 6836L - X	
07/09/2021	Pls refer to VIEWS for details.	

STAGE	DATE / PIC
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
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/sum S$ 1,450.00 (2 days) Reduction: 56 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 07/09/2021 Confirm with Jim Email ☑ Call ☐

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

Repair Cost: w/GST S$ 1,551.50

Loss of Rental (LOR): S$ 287.38 (2.5 days) x S$114.95

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$ 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$ 1,840.88 **Global Sum S$:** 1,840.00

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

Payee 1:	S$ 1,840.00	Name 1:	ComfortDelGro Engineering Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	