

ASSIGNMENT

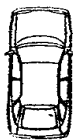
Surveyor: Naz

DOI: 24/05/2021

Date / Time : 24/05/2021

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : **SMK 1935J**

Claim No. :

Name of Insured : BESTLINK VEHICLE PTE LTD

Policy No. :

Insured Tel No. : HP:

Make / Model :

Excess Sec II :S\$ D.O.A : 21/05/2021

Place of Accident :

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

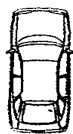
If **NO**, Driver Name / Age :

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

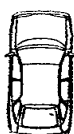
Driver Tel No. : (V/L: **YES** / NO)

Insured Liability :	%	Final ? Yes / No
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SHA 5727D



INSRS:
WSP: COMFORTDELGRO
Tel : (LOYANG)
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time				
	SHA 5727D : CC4/FCI20008765/R1ka3q2 ; DOA : 14/08/2020	STAGE	DATE / PIC	
	SMK 1935J : X	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:		☐
PRELIMINARY ADVICE	Date/Time:	Sent By:	Post-Repair Photos:	☐
			Others:	☐
FINALIZATION	Date/Time:	Confirm with:	Confirm by:	
Repair Cost:	L/SUM S\$ 4,200.00 (3 days) Reduction: 27 %		Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: 26/8/2021	Confirm with	Email ☒	Cal ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 15		If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 4,494.00			
Loss of Rental (LOR):	S\$ 664.02 (6 days) x \$110.67			
Loss of Use (LOU):	S\$ (\$ x days)			
Loss of Income (LOI):	S\$ 300.00 (\$ 50 x 6 days)			
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOU ☒	[Tick only one]			
GIA/LTA Search	S\$ 7.49			
Medical:	S\$		1) Claim status: Normal/Reject/Private Settlement	
Disbursement:	S\$ (e.g. Tow/ Independent)		2) Report Format: TP	
Legal Cost	S\$		3) Survey fee: 400.00	
Total:	S\$5,465.51	Global Sum S\$:		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐	Cal ☐
Payee 1:	S\$ 5,465.51	Name 1:	ComfortDelgro Engineering Pte Ltd	
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		