15/5/2010

INS. CASE OWNER: CC3/CTI21006929/Nes3

LKK:

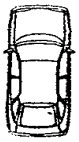
IDAC:

ASSIGNMENT

Surveyor: Naz DOI: 22/06/2021 Date / Time : 22/06/2021

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : SLL 169S Claim No. :

Name of Insured : AUTOBAHN RENT A CAR PTE. LTD. Policy No. :

Insured Tel No. : HP: Make / Model :

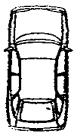
Excess Sec II :S$ D.O.A : 20/06/2021 Place of Accident :

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

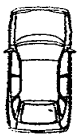
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

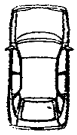
SHA 1643M → → →



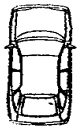
INSRS:
WSP: COMFORTDELGRO
Tel : (LOYANG)
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SHA 1643M : CC3/AIG14015859/M1py3q2 ; DOA : 15/08/2014
	SLL 169S : CC3/LCR17013376/R1pb3q2 ; DOA : 09/07/2017

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: NAZ

Repair Cost: P/P S$ 2,637.20 (3 days) Reduction: 28% Email Call

FINAL SETTLEMENT Date/Time: 14.10.21 Confirm with CATHERINE Email Cal

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 2,821.80 OID REAR ENDED TP	
Loss of Rental (LOR):	S$ 438.17 (3.5 days) X $125.19	
Loss of Use (LOU):	S$ - ($ x days)	
Loss of Income (LOI):	S$ 175.00 ($ 50 x 3.5 days)	
LOR only LOU only LOR + LOU LOR + LO ✓ [**Tick only one**]		
GIA/LTA Search	S$ 7.49	
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: $400
Total:	**S$** 3,442.46 **Global Sum S$:** 3,440.00	

FINAL PAYMENT Date/Time: 14.10.21 Confirm with: CATHERINE Email Cal

Payee 1:	S$ 3,440.00	Name 1:	COMFORTDELGRO ENGINEERING PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	