15/5/2010

INS. CASE OWNER: CC4/ASM21007183/Uga3

LKK:

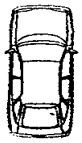
IDAC: 218035

ASSIGNMENT

Surveyor: MARCUS DOI: 30/06/2021 Date / Time : 30/06/2021

Registered in Merimen: ——

Pre-assign / CCU / FTE



Insured Vehicle No. : SH 8236S Claim No. : S1M03C8N

Name of Insured : COMFORT TRANSPORATION PTE LTD Policy No. : P2419138

Insured Tel No. : HP: Make / Model : Hyundai I40

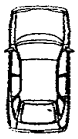
Excess Sec II :S$ D.O.A : 20/06/2021 03:40 Place of Accident : JUNCTION OF TAMPINES AVE 10 AND TAMPINES AVE 9

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

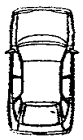
If **NO**, Driver Name / Age : CHUNG CHEE LOONG OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

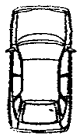
SLS 5162R → → →



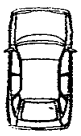
INSRS:
WSP: Nineteen Autowerks Pte Ltd
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SH 8236S - CS/FCI16024425/Kvbn2 ; 19/12/2016	Non-Reporting ltr (1st):	
	CS/FCI18012195/Gvd3n2 ; 30/06/2018	Non-Reporting ltr (2nd):	
	NS/INC12008927/H1qn ; 02/05/2012	Non-Reporting ltr (Final):	
	NS/INC18019173/K1qbn2 ; 20/10/2018	Notification ltr (if non-pickup):	
	SLS 5162R - 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: L/S S$ $26,000.00 (30 days) Reduction: $24,563.49 % 49 Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 09/12/2021 Confirm with VESSIE Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 15	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 26,000.00	
Loss of Rental (LOR):	S$ (days)	
Loss of Use (LOU):	S$ 2,880.00 ($ 80 x 36 days)	
Loss of Income (LOI):	S$ ($ x days)	
LOR only ☐ LOU only ☑ LOR + LOU ☐ LOR + LOI ☐ [**Tick only one**]		
GIA/LTA Search	S$ 7.45	
Medical:	S$	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ 197.70 (e.g. Tow / Independent)	2) Report Format: TP
Legal Cost	S$	3) Survey fee: $350.00
Total:	**S$** 29,085.15 **Global Sum S$:** 29,000.00	

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

Payee 1:	S$ 29,000.00	Name 1:	NINETEEN AUTOWERKS PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	