

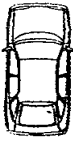
INS. CASE OWNER:

ASSIGNMENT

Surveyor:

ADRIANDOI: **02/07/2021**Date / Time : **02/07/2021**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **SHA 3872E**Claim No. : **S1M03CXO**Name of Insured : **COMFORT TRANSPORTATION PTE LTD**Policy No. : **P2419138**

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$D.O.A : **01/07/2021 11:25**Place of Accident : **PIE**

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

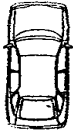
If NO, Driver Name / Age : **GOH KIM LAM**

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

Driver Tel No. : _____

(V/L: YES / NO)

Insured Liability : _____ %

Final ? Yes / No**SKB 9473T****SHA3872E****SGK 8058R**

INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS: **OI**INSRS: **N-51**WSP: **Automotive**Tel : **Pte Ltd**

Liability :

RMKS: **TP**

INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

SGK 8058R - NBA/INC18018753/Y ; 15/10/2018
NBA/INC19001075/Y ; 16/01/2019
SHA 3872E - CB/AIG09015722/wz1 ; 11/02/2006
CS/III14001424/R1qm3u2 ; 14/01/2014
NS/INC16023708/H1qh3m2 ; 10/12/2016

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\$ **5,300.00** (**6** days) Reduction: **37** %Email ☒ Call ☐**FINAL SETTLEMENT**Date/Time: **01/04/2022**Confirm with **Hui Xin**Email ☒ Call ☐Final Liability: % **100** (Agreed / Assessed) BOLA S/N No. : **28**If NO or B 28, Ass. Lia : **0**Repair Cost: **w/GST** S\$ **5,671.00**Loss of Rental (LOR) **w/GST** S\$ **642.00** (**6** days) x \$100

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\$ **7.45**

Medical: S\$

Disbursement: S\$ **100.00** (e.g. Tow/ independent)

Legal Cost S\$

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

TP

3) Survey fee:

\$350.00**Total:** S\$ **6,420.45****Global Sum S\$: 6,100.00 (as per AXA mandate)****FINAL PAYMENT**

Date/Time:

Confirm with:

Email ☒ Call ☐Payee 1: S\$ **6,100.00**

Name 1:

N-51 Automotive Pte Ltd

Payee 2: (Strike if N.A.) S\$

Name 2:

Payee 3: (Strike if N.A.) S\$

Name 3: