15/5/2010

INS. CASE OWNER: CC4/AIG21008509/T1ga3

LKK:

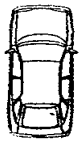
IDAC:

ASSIGNMENT

Surveyor: TAUFIKH DOI: 13/08/2021 Date / Time : 13/08/2021

Registered in Merimen: 13/08/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : GBD 5944Z Claim No. :

Name of Insured : PENG YAP M&E SYSTEMS PTE LTD Policy No. : 2070176469

Insured Tel No. : HP: Make / Model : Toyota DYNA

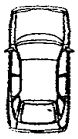
Excess Sec II :S$ D.O.A : 12/08/2021 12:00 Place of Accident : UPP THOMSON ROAD

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

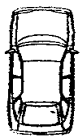
If **NO**, Driver Name / Age : SOON SOANG HOCK OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

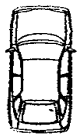
SHB 3819E → → →



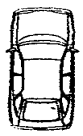
INSRS:
WSP: CDGE
Tel : LOYANG
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SHB 3819E - CS/FCI18002685/d3XX; 06/02/2018	**STAGE**	**DATE / PIC**
	CS/RSI10003112/Fqr1; 11/02/2010	Non-Reporting ltr (1st):	
	NA/INC09016164/s1; 14/07/2009	Non-Reporting ltr (2nd):	
	NS/INC10009872/Fr1; 18/05/2010	Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
	GBD 5944Z - X	Call OI:	
		After call ltr to OI:	
		Documentation Check List:	**Handler** / **Typist**
		Notification ltr (if non-pickup)	
		After call ltr to OI:	
	TPV: TOYOTA PRIUS - 1798cc	Authorisation To Act:	
		Release Voucher:	
CLAIMANT -	COMFORT TRANSPORTATION PTE LTD	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/S	S$ $2,200.00 (2 days) Reduction: $53.12 % 2		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 11/04/2022	Confirm with JIM	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :
Repair Cost:	S$ 2,354.00 W/GST		
Loss of Rental (LOR):	S$ 501.60 (4 days) x $125.40		
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ 200.00 ($ 50 x 4 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: $320.00
Total:	**S$** 3,057.60 **Global Sum S$:** 3,000.00		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 3,000.00	Name 1:	COMFORTDELGRO ENGINEERING PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	