15/5/2010

INS. CASE OWNER: CC3/CTI21010244/Ges3

LKK:

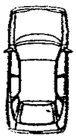
IDAC:

ASSIGNMENT

Surveyor: XGQ DOI: 01/10/2021 Date / Time : 05/10/2021

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : GZ 6431E

Name of Insured : HONG SHENG HARDWARE & INDUSTRIAL SUPPLY

Insured Tel No. : HP:

Excess Sec II :S$

Is driver the owner? (YES / NO)

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

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

Claim No. :

Policy No. :

Make / Model :

D.O.A : 29/09/2021

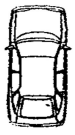
Place of Accident :

Nature of Accident :

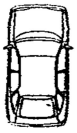
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : % **Final ? Yes / No**

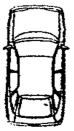
SH 7226C → → →



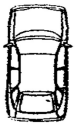
INSRS:
WSP: COMFORTDELGRO
Tel : (LOYANG)
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SH 7226C : CC4/AIG19021023/Fka3q2 ; DOA : 27/11/2019	**STAGE** **DATE / PIC**
	GZ 6431E : 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: XGQ
Repair Cost: L/S	S$ 3,200.00 (4 days)	Reduction: 48 %	Email Call
FINAL SETTLEMENT	Date/Time: 08.02.22	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$ 3,424.00	OID REAR ENDED TP	
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 ($50 x 6 days)		
LOR only	LOU only	LOR + LOU	LOR + LO ✓ [**Tick only one**]
GIA/LTA Search	S$ 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: $400
Total:	**S$** 4,390.02	**Global Sum S$:** 4,390.00	
FINAL PAYMENT	Date/Time: 08.02.22	Confirm with: CATHERINE	Email Cal
Payee 1:	S$ 4,390.00	Name 1: COMFORTDELGRO ENGINEERING PTE LTD	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	