

ASSIGNMENT

Surveyor:

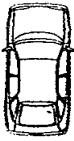
TAUFIKH

DOI: 27/10/2021

Date / Time : 26/10/2021

Registered in Merimen: _____

Pre-assign / CCU / FTE



Insured Vehicle No. : SH 6325G

Claim No. : S1M03KS7

Name of Insured : COMFORT TRANSPORTATION PTE LTD

Policy No. : P2419138

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$

D.O.A : 25/10/2021

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

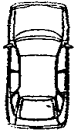
Driver Tel No. :

(V/L: YES / NO)

Insured Liability : %

Final ? Yes / No

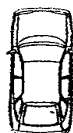
SLD 978R



INSRS:
WSP: RICO 60 AUTO
Tel : SERVICES
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SLD 978R - NA/LIP21005034/r3 ; 16/04/2021	STAGE	DATE / PIC
	NM/MSG21004872/Ah4 ; 16/04/2021	Non-Reporting ltr (1st):	
	SH 6325G - CC3/AXA11007782/H1ja3k2 ; 25/04/2011	Non-Reporting ltr (2nd):	
	CC3/AXA11017407/H1q1c3q2; 24/08/2011	Non-Reporting ltr (Final):	
	NBA/LPC21006756/Y ; 16/12/2020	Notification ltr (if non-pickup):	
	NS/INC10011524/Dr1 ; 10/06/2010	Call OI:	
	NS/INC16012073/H1gbn2 ; 28/06/2016	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 :	☐ ☐
	TPV: MAZDA 3 - 1496cc	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: LS	S\$ 3,650.00 (5 days) Reduction: \$13,980.64 % 79	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 28/06/2022 Confirm with SHANELLE	Email ☒ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 3,905.50 W/GST		
Loss of Rental (LOR):	S\$ 500.00 (5 days) x \$100.00		
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\$	1) Claim status: ☒ Normal/Reject/Private Settle	
Disbursement:	S\$ (e.g. Tow/ Independent)	2) Report Format: TP	
Legal Cost	S\$	3) Survey fee: \$350.00	
Total:	S\$ 4,412.95 Global Sum S\$: 4,400.00		
FINAL PAYMENT	Date/Time: _____ Confirm with: _____ Email ☒ Call ☐		
Payee 1:	S\$ 4,400.00 Name 1: RICO 60 AUTO SERVICES PTE LTD		
Payee 2: (Strike if N.A.)	S\$ Name 2:		
Payee 3: (Strike if N.A.)	S\$ Name 3:		