15/5/2010

INS. CASE OWNER:

CC4/AIG21011656/Tea3

LKK:

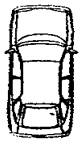
IDAC:

ASSIGNMENT

Surveyor: TAUFIKH DOI: 15/11/2021 Date / Time : 15/11/2021

Registered in Merimen: 15/11/2021

Pre-assign / CCU / FTE



Insured Vehicle No. : SKL 7494T Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

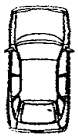
Excess Sec II :S$ D.O.A :12.11.2021 09:15 Place of Accident :

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

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

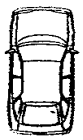
Driver Tel No. : (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SHB 2989D → → →

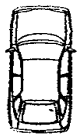


INSRS:
WSP:
Tel :
Liability :
RMKS:

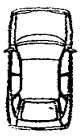
CDGE
LOYANG



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SHB 2989D - CC3/AIG15020268/H1wb3q2; 26/11/2015	**STAGE**	**DATE / PIC**
	CS/FCI17001960/M1tbe2; 28/01/2017	Non-Reporting ltr (1st):	
	CS3/ASM21007531/Vvce2; 09/07/2021	Non-Reporting ltr (2nd):	
	SKL 7494T - X	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: MRB
Repair Cost: P/P	S$ 1,426.12 (2 days)	Reduction: 54 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 11.04.22	Confirm with JIM	Email ☐ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 1,525.95	OI REAR ENDED TP	
Loss of Rental (LOR):	S$ 192.60 (1.5 days)	x $128.40	
Loss of Use (LOU):	S$ - ($ x days)		
Loss of Income (LOI):	S$ 75.00 ($ 50 x 1.5 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: $320
Total:	**S$** 1,795.55	**Global Sum S$:** 1,790.00	

FINAL PAYMENT	Date/Time: 11.04.22	Confirm with: JIM	Email ☐ Call ☐
Payee 1:	S$ 1,790.00	Name 1:	COMFORTDELGRO ENGINEERING PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	