

ASSIGNMENT

Surveyor:

Taufikh

DOI:

22/11/2021

Date / Time :

22/11/2021

Registered in Merimen:

22/11/2021**Pre-assign / CCU / FTE**Insured Vehicle No. : **SKJ 2477L**Claim No. : **6752835264SG**Name of Insured : **Woo Pun Chong**Policy No. : **2100333059-08**

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **21/11/2021**

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****SHD 4777A**INSRS:
WSP: COMFORTDELGRO
Tel : (LOYANG)
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SHD 4777A : CS/TMI15018645/H1vbn2 ; DOA : 01/11/2015	STAGE
	SKJ 2477L : CC6/AIG19014165/Uka3q2 ; DOA : 07/08/2019	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: ☐ ☐
PRELIMINARY ADVICE	Date/Time:	Sent By:
		Post-Repair Photos: ☐ ☐
		Others: ☐ ☐
FINALIZATION	Date/Time:	Confirm with:
Repair Cost: P/P	S\$ 1,879.42 (2 days) Reduction: 20 %	Confirm by:
		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 16/06/2022	Confirm with Jim
		Email ☒ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S\$ 2,010.98	
Loss of Rental (LOR):	S\$ 250.38 (2 days) x S\$ 125.19	
Loss of Use (LOU):	S\$ _____ (\$ x days)	
Loss of Income (LOI):	S\$ 100.00 (\$ 50 x 2 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: \$320.00
Total:	S\$ 2,363.36	Global Sum S\$: 2,300.00
FINAL PAYMENT	Date/Time:	Confirm with:
		Email ☒ Call ☐
Payee 1:	S\$ 2,300.00	Name 1: ComfortDelGro Engineering Pte Ltd
Payee 2: (Strike if N.A.)	S\$ _____	Name 2: _____
Payee 3: (Strike if N.A.)	S\$ _____	Name 3: _____