

Surveyor:

MARCUS

DOI:

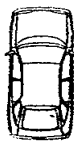
ASSIGNMENT
16/12/2021

Date / Time :

15/12/2021

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SH 6991H

Claim No. : S1M03NHI

Name of Insured : COMFORT TRANSPORTATION PTE LTD

Policy No. : P2419138

Insured Tel No. : HP: _____

Make / Model : _____

Excess Sec II : \$

D.O.A : 30/11/2021 21:30

Place of Accident : _____

Is driver the owner?

(YES / NO)

Nature of Accident : _____

If NO, Driver Name / Age :

Driver Tel No. :

(V/L: YES / NO)

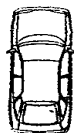
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability :

%

Final ? Yes / No

JNG 6961

INSRS: TK Lee
WSP: Automotive
Tel : Pte Ltd
Liability:
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	JNG 6961 - X	Non-Reporting ltr (1st):	
	SH 6991H - CS/LAW11024002/M1qtk3; 11/03/2011	Non-Reporting ltr (2nd):	
	CS3/III20008038/Etf3e2; 02/08/2020	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: CKS		
Repair Cost: L/S S\$ 1,300.00 (4 days) Reduction: 51 %		Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 16.06.22 Confirm with IVY	Email ☐ Call ☐	
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : NIL		If NO or B 28, Ass. Lia :	
Repair Cost: S\$ 1,300.00		PIR AGAINST OI	
Loss of Rental (LOR): S\$ - (_____ days)			
Loss of Use (LOU): S\$ 120.00 (\$ 20 x 6 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	
Total: S\$ 1,427.45	Global Sum S\$:		
FINAL PAYMENT	Date/Time: 16.06.22 Confirm with: IVY	Email ☐ Call ☐	
Payee 1: S\$ 1,427.45	Name 1: T K LEE AUTOMOTIVE PTE LTD		
Payee 2: (Strike if N.A.) S\$ _____	Name 2: _____		
Payee 3: (Strike if N.A.) S\$ _____	Name 3: _____		