

ASSIGNMENT

Surveyor:

Taufikh

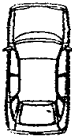
DOI:

20/12/2021

Date / Time :

21/12/2021

Registered in Merimen:

21/12/2021**Pre-assign / CCU / FTE**Insured Vehicle No. : **SMK 3774T**

Claim No. : _____

Name of Insured : **HAYLEY TERESE PEREIRA**

Policy No. : _____

Insured Tel No. : _____ HP: _____

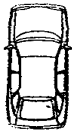
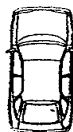
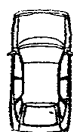
Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : **20/12/2021**

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 6726J**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 6726J : NA/INC18016431/z4 ; DOA : 10/09/2018	STAGE DATE / PIC
	SMK 3774T : 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:
07/03/2022	Pls refer to VIEWS for details.	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\$ 1,643.52 (2 days) Reduction: 35 %	Confirm by:
FINAL SETTLEMENT	Date/Time: 07/03/2022 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\$ 1,758.57	
Loss of Rental (LOR):	S\$ 312.98 (2.5 days) x S\$125.19	
Loss of Use (LOU):	S\$ (\$ x days)	
Loss of Income (LOI):	S\$ 125.00 (\$ 50 x 2.5 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\$ 2,198.55 Global Sum S\$: 2,190.00	
FINAL PAYMENT	Date/Time:	Confirm with:
Payee 1:	S\$ 2,190.00 Name 1: ComfortDelGro Engineering Pte Ltd	Email ☒ Call ☐
Payee 2: (Strike if N.A.)	S\$ Name 2:	
Payee 3: (Strike if N.A.)	S\$ Name 3:	