15/5/2010

INS. CASE OWNER:

CC3/CTI22000432/Gga3

LKK:

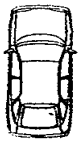
IDAC:

ASSIGNMENT

Surveyor: XGQ DOI: 11.01.2022 Date / Time : 11.01.2022

Registered in Merimen: ——

Pre-assign / CCU / FTE



Insured Vehicle No. : GBF 2263P Claim No. : SNM22D200333

Name of Insured : Policy No. : DMCVSNW00085262100

Insured Tel No. : HP: Make / Model :

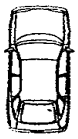
Excess Sec II :S$ D.O.A : 09.01.2022 00:45 Place of Accident : Ubi Rd 1

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

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

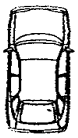
Driver Tel No. : (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SH 6998P → → →

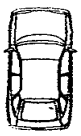


INSRS:
WSP: CDGE LOYANG
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			
	SH 6998P - CC3/AIG08017001/VDn ; 05/06/2008	**STAGE**	**DATE / PIC**
	CC3/FCI15019880/Kgbc2; 12/11/2015	Non-Reporting ltr (1st):	
	CS/FCI18020091/Dvbn2; 04/11/2018	Non-Reporting ltr (2nd):	
	CS3/FCI15002271/vbXX; 03/02/2015	Non-Reporting ltr (Final):	
	CS3/FCI16021959/R1gh3s2; 15/11/2016	Notification ltr (if non-pickup):	
	NA/INC15002076/d2; 03/02/2015	Call OI:	
	NA/MSG10022595/r ; 10/11/2010	After call ltr to OI:	
	NS/INC15002144/H1vbu2; 03/02/2015	**Documentation Check List:**	**Handler** **Typist**
	GBF 2263P - X	Notification ltr (if non-pickup)	☐ ☐
		After call ltr to OI:	☐ ☐
		Authorisation To Act:	☐ ☐
		Release Voucher:	☐ ☐
	CLAIMANT - COMFORT TRANSPORTATION PTE LTD	Final Repair Bill:	☐ ☐
		Car Rental Invoice:	☐ ☐
	TPV: TOYOTA PRIUS - 1798cc	Towing Invoice	☐ ☐
		LTA / GIA :	☐ ☐
OI: GREAT WALL TECHNOLOGY ALUMINIUM INDUSTRY PTE LTD		Medical Bill:	☐ ☐
		PIR:	☐ ☐
OID: KHAN PAPEL		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: L/S	S$ 2150.00 (3 days) Reduction: 3116.28	% 59	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 07/04/2022	Confirm with CATHERINE	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost:	S$ 2,300.50	W/GST	
Loss of Rental (LOR):	S$ 501.60 (4 days)	x $125.40	
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ 200.00 ($ 50 x 4 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: $400.00
Total:	**S$** 3004.10	**Global Sum S$:**	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 3004.10	Name 1:	COMFORTDELGRO ENGINEERING PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	