

ASSIGNMENT

Surveyor:

THEVAN

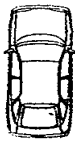
DOI:

18/01/2021

Date / Time :

18/01/2021

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : **SJV 740M**
 Name of Insured : **CHAN CHOR TENG DOMINIC**

Claim No. : **SNM22D200467**
 Policy No. : **DMPCSNW00013802201**

Insured Tel No. : _____ HP: _____
Excess Sec II :S\$ _____ D.O.A : **17/01/2022 14:30**

Make / Model : _____
 Place of Accident : **TAXI STAND AMK HUB**

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

If **NO**, Driver Name / Age : **YU FOONG KWAI**

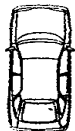
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : _____

(V/L: YES / NO)

Insured Liability : _____ %

Final ? Yes / No

SHC 3848R

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



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SHC 3848R - CC3/AIG07004398/Vtn; 05/12/2007	Non-Reporting ltr (1st):	
	CC3/AIG16017315/M1wb3q2 ; 13/09/2016	Non-Reporting ltr (2nd):	
	CC3/TMI16013571/H1vbn2; 19/07/2016	Non-Reporting ltr (Final):	
	CS/FC117013436/Kvbe2; 06/07/2017	Notification ltr (if non-pickup):	
	CS/MSG17021965/K1vbn2; 16/11/2017	Call OI:	
	NA/MSI09025461/r; 11/11/2009	After call ltr to OI:	
	NBM/FC113013770/S; 30/07/2013	Documentation Check List: Handler Typist	
	NS/INC10002657/Fh; 03/03/2010	Notification ltr (if non-pickup)	☐
	NS/INC10021113/Dn; 19/10/2010	After call ltr to OI:	☐
	SJV 740M - X	Authorisation To Act:	☐
		Release Voucher:	☐
		Final Repair Bill:	☐
		Car Rental Invoice:	☐
		Towing Invoice	☐
		LTA / GIA :	☐
	CLAIMANT - COMFORT TRANSPORTATION PTE LTD	Medical Bill:	☐
		PIR:	☐
	TPV: HYUNDAI I40 - 1685cc	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: LS	S\$ 1,050.00 (2 days) Reduction: 840.82 % 44	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 12/07/2022 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\$ 1,123.50 W/GST		
Loss of Rental (LOR):	S\$ 332.01 (3 days) x \$110.67		
Loss of Use (LOU):	S\$ (\$ x days)		
Loss of Income (LOI):	S\$ 150.00 (\$ 50 x 3 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\$ 1,607.51 Global Sum S\$:		
FINAL PAYMENT	Date/Time: _____ Confirm with: _____ Email ☒ Call ☐		
Payee 1:	S\$ 1,607.51 Name 1: COMFORTDELGRO ENGINEERING PTE LTD		
Payee 2: (Strike if N.A.)	S\$ Name 2:		
Payee 3: (Strike if N.A.)	S\$ Name 3:		