15/5/2010

INS. CASE OWNER:

CC3/CTI22000796/Vpa3

LKK:

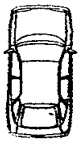
IDAC:

ASSIGNMENT

Surveyor: THEVAN DOI: 18/01/2022 Date / Time : 18/01/2022

Registered in Merimen: ——

Pre-assign / CCU / FTE



Insured Vehicle No. : GBJ 5219C Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

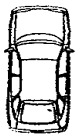
Excess Sec II :S$ D.O.A : 16/01/2022 Place of Accident :

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

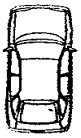
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

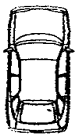
SHC 2635U → → →



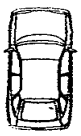
INSRS:
WSP: CDGE
Tel : LOYANG
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	GBJ 5219C - X SHC 2635U - CC4/III18011686/Ahb3q2; 23/06/2018 CS/QW18009563/K1sbs2; 21/05/2018 CS/TMI15015291/H1gbn2; 06/09/2015	**STAGE** **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:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE	Date/Time:	Sent By:	
FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: L/sum	S$ 3,800.00 (2 days)	Reduction: 49 %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 25/03/2022	Confirm with Catherine	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 4,066.00		
Loss of Rental (LOR):	S$ 513.60 (4 days)	x $128.40	
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ 200.00 ($50 x 4 days)		
LOR only ☐ LOU only ☐	LOR + LOU ☐	LOR + LOI ☑ [**Tick only one**]	
GIA/LTA Search	S$ 7.49		
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: $400.00
Total:	**S$** 4,787.09	**Global Sum S$:** 4,750.00	

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 4,750.00	Name 1:	ComfortDelGro Engineering Pte Ltd
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	