

Surveyor:

Adrian

DOI:

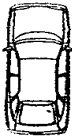
ASSIGNMENT
07/02/2022

Date / Time :

26/01/2022

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SHD 3250J

Claim No. : _____

Name of Insured : COMFORT TRANSPORTATION PTE LTD

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 24/01/2022

Place of Accident : Sengkang E Ave

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

If NO, Driver Name / Age :

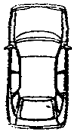
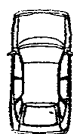
OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NO

Driver Tel No. :

(V/L: ☒ YES / NO)

Insured Liability : % Final ? Yes / No

SMC 9994C

INSRS:
WSP:
Tel : SM AUTOMOTIVE
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SMC 9994C : X ; SHD 3250J : X		STAGE	DATE / PIC
			Non-Reporting ltr (1st):	
			Non-Reporting ltr (2nd):	
			Non-Reporting ltr (Final):	
	CLAIMANT - MERDANEE BIN HAJI MASSA'ID		Notification ltr (if non-pickup):	
			Call OI:	
			After call ltr to OI:	
	TPV: RANGE ROVER		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:	
Repair Cost: L/S	S\$ 3500.00	(3 days) Reduction: \$6,095.00 % 64	Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: 07/04/2022	Confirm with SUKYI	Email ☒	Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 3,500.00			
Loss of Rental (LOR):	S\$ 450.00	(3 days) x 150		
Loss of Use (LOU):	S\$ (\$ x days)			
Loss of Income (LOI):	S\$ (\$ x days)			
LOR only ☒	LOU only ☐	LOR + LOU ☐	[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: \$350.00	
Total:	S\$ 3,957.45	Global Sum S\$: 3,950.00		
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒	Call ☐
Payee 1:	S\$ 3,950.00	Name 1: SM AUTOMOTIVE		
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		