15/5/2010

INS. CASE OWNER: CC3/CTI22001944/Tea3

LKK:

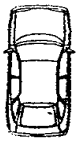
IDAC:

ASSIGNMENT

Surveyor: Taufikh DOI: 28/02/2022 Date / Time : 28/02/2022

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : SLX 2844A Claim No. : SNM22D201499/C02/SLX2844A/LEWLC

Name of Insured : TANG LAI SENG Policy No. : DMPCSNW00010112200

Insured Tel No. : HP: Make / Model :

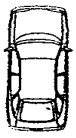
Excess Sec II :S$ D.O.A : 25/02/2022 Place of Accident :

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

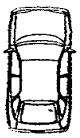
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

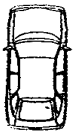
SHD 6550Z → → → →



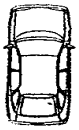
INSRS:
WSP: COMFORTDELGRO (LOYANG)
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
	SHD 6550Z : CC3/EQI18010287/K1pa3q2 ; DOA : 03/06/2018	**STAGE** **DATE / PIC**
	SLX 2844A : NA/CTI22001991/r3 ; DOA : 25/02/2022	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:
PRELIMINARY ADVICE Date/Time: Sent By:		Post-Repair Photos:
		Others:

FINALIZATION	Date/Time:	Confirm with:	Confirm by: MTH
Repair Cost: P/P	S$ 1,243.60 (2 days)	Reduction: 79 %	Email Call
FINAL SETTLEMENT	Date/Time: 22.06.22	Confirm with CATHERINE	Email Cal
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: w/GST	S$ 1,330.65	OI REAR ENDED TP	
Loss of Rental (LOR):	S$ 647.35 (5 days)	x $129.47	
Loss of Use (LOU):	S$ - ($ x days)		
Loss of Income (LOI):	S$ 250.00 ($ 50 x 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: $400
Total:	**S$** 2,230.00	**Global Sum S$:**	
FINAL PAYMENT	Date/Time: 22.06.22	Confirm with: CATHERINE	Email Cal
Payee 1:	S$ 2,230.00	Name 1:	COMFORTDELGRO ENGINEERING PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	