

INS. CASE OWNER:

ASSIGNMENTSurveyor: **STEVE**DOI: **19/04/2022**Date / Time : **31.03.2022**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **SHA 3787T**Claim No. : **S2M03WYI**Name of Insured : **COMFORT TRANSPORTATION PTE LTD**Policy No. : **P2465679**

Insured Tel No. : _____ HP: _____

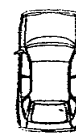
Make / Model : **Hyundai Ae ioniq**Excess Sec II :S\$ _____ D.O.A : **26/03/2022 14:10**Place of Accident : **18C Holland Dr, Singapore 274018**

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

DRIVEWAY @ HOLLAND DRIVEIf NO, Driver Name / Age : **GOK CHENG KIAN**

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

Driver Tel No. : _____ (V/L: YES / NO)

Insured Liability : % **Final ? Yes / No****GBK 361B**INSRS:
WSP: **Sin Sheng Auto**
Tel : **Workshop P/L**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time				
	GBK 361B - X		STAGE	DATE / PIC
	SHA 3787T - CC3/AXA11023380/H1edc1 ; 12/11/2011		Non-Reporting ltr (1st):	
	CS/FCI18010817/d3XX ; 08/06/2018		Non-Reporting ltr (2nd):	
	CS3/ASM21003807/Gqf3e2 ; 20/03/2021		Non-Reporting ltr (Final):	
	NS/INC12015675/H1vk3; 10/08/2012		Notification ltr (if non-pickup):	
			Call OI:	
			After call ltr to OI:	
			Documentation Check List:	Handler
			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: CTY	
Repair Cost: P/P	S\$ 980.00	(3 days) Reduction: 42 %	Email ☐	Call ☐
FINAL SETTLEMENT	Date/Time: 22.06.22	Confirm with QUEK	Email ☐	Call ☐
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 980.00	OID TURN INTO MAIN DRIVEWAY HIT TP		
Loss of Rental (LOR):	S\$ -	(_____ days)		
Loss of Use (LOU):	S\$ 400.00	(\$ 100 x 4 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\$ -			
Disbursement:	S\$ -	(e.g. Tow/ Independent)	1) Claim status: Normal/ Reject/Dispute/Settle	
Legal Cost	S\$ -		2) Report Format: TP	
			3) Survey fee: \$350	
Total:	S\$ 1,387.45	Global Sum S\$:		
FINAL PAYMENT	Date/Time: 22.06.22	Confirm with: QUEK	Email ☐	Call ☐
Payee 1:	S\$ 1,387.45	Name 1:	SIN SHENG AUTO WORKSHOP PTE LTD	
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		