

INS. CASE OWNER:

ASSIGNMENT

Surveyor:

ADRIAN

DOI:

Date / Time : **01.04.2022**

Registered in Merimen:

Pre-assign / CCU / FTEInsured Vehicle No. : **SHA 7455A**Claim No. : **S2M03X6C**Name of Insured : **COMFORT TRANSPORTATION PTE LTD**Policy No. : **P2465679**

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$D.O.A : **29/03/2022 16:30**Place of Accident : **Mandai Lake Rd, Singapore**

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

If NO, Driver Name / Age : **RICHARD LAM KIM HOCK**

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

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

Insured Liability : % **Final ? Yes / No****GBB 6377P**INSRS:
WSP: **SM**
Tel : **AUTOMOTIVE**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	GBB 6377P - X		
	SHA 7455A - CC4/III18014802/T1wa3q2 ; 27/07/2018	Non-Reporting ltr (1st):	
	CC6/III17018066/Aya3q2 ; 15/09/2017	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:	
Repair Cost: L/SUM	S\$ 7,200.00 (6 days) Reduction: 46 %	Email ☒ Call ☐	
FINAL SETTLEMENT	Date/Time: 14/12/2022 Confirm with Sukyi	Email ☐ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 5	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 7,000.00 (as per AXA mandate)		
Loss of Rental (LOW/GST)	S\$ 749.00 (7 days) X \$100		
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\$ 7,756.45 Global Sum S\$: 7,750.00		
FINAL PAYMENT	Date/Time: _____ Confirm with: _____	Email ☒ Call ☐	
Payee 1:	S\$ 7,750.00 Name 1: SM AUTOMOTIVE		
Payee 2: (Strike if N.A.)	S\$ Name 2:		
Payee 3: (Strike if N.A.)	S\$ Name 3:		