

INS. CASE OWNER:

ASSIGNMENTSurveyor: **ADRIAN**

DOI: _____

Date / Time : **13/05/2022**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **SHC 8086P**Claim No. : **S2M040Y3**Name of Insured : **COMFORT TRANSPORTATION PTE LTD**Policy No. : **P2465714**

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$D.O.A : **11/05/2022 02:00**Place of Accident : **Buangkok Dr, Singapore**

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**SLE 9520M**INSRS:
WSP: **Kang Car
Repairers
Pte Ltd**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time				
	SLE 9520M - NA/INC18008773/z4 ; 13.05.2018	STAGE	DATE / PIC	
	SHC 8086P - CC3/AIG10007038/Ca2f2n ; 12/04/2010	Non-Reporting ltr (1st):		
	CC3/AIG14018084/H1re3w2 ; 21/09/2014	Non-Reporting ltr (2nd):		
	CC3/CTI17001207/H1hg3q2 ; 16/01/2017	Non-Reporting ltr (Final):		
	CC3/FCI13007605/Kvn ; 23/02/2013	Notification ltr (if non-pickup):		
	CC3/TMI19009820/T1qd3s2 ; 02/06/2019	Call OI:		
	CS/FCI14010367/Uvm3k3 ; 29/05/2014	After call ltr to OI:		
	CS/FCI15005168/Gqy3k3 ; 21/03/2015	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\$ 18,000.00	(17 days) Reduction: 34 %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: 07/04/2023	Confirm with Sharon	Email ☒ Call ☐	
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :	
Repair Cost: 8% GST	S\$ 19,440.00			
Loss of Rental (LOR):	S\$ 2,000.00	(20 days) X \$100		
Loss of Use (LOU):	S\$ (\$ x days)			
Loss of Income (LOI):	S\$ (\$ x days)			
LOR only ☒ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]				
GIA/LTA Search	S\$			
Medical:	S\$ 145.90		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\$ 21,585.90	Global Sum S\$:		
FINAL PAYMENT	Date/Time: _____	Confirm with: _____	Email ☒ Call ☐	
Payee 1:	S\$ 21,585.90	Name 1: Kang Car Repairers Pte Ltd		
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		