			LKK:	
INS. CASE OWNER:	KOH Janice	CC4/ASM22004538/Apa3	IDAC:	260962

ASSIGNMENT

Surveyor: **ADRIAN**   DOI: _____   Date / Time : **13/05/2022**
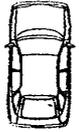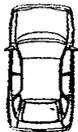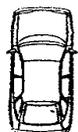
Registered in Merimen: _____

Pre-assign / CCU / FTE
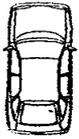
Insured Vehicle No. : **SHD 3806G**   Claim No. : **S2M040RS**

Name of Insured : **COMFORT TRANSPORTATION PTE LTD**   Policy No. : **P2465679**

Insured Tel No. : _____   HP: _____   Make / Model : _____

Excess Sec II :S$ _____   D.O.A : **06/05/2022 17:20**   Place of Accident : **PIE, 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**

SCL 2828S ⟶ ⟶ ⟶ ⟶

INSRS:	INSRS:	INSRS:	INSRS:
WSP: **N-51 Automotive Pte Ltd**	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time		STAGE	DATE / PIC
	SCL 2828S - CC4/AXA11006790/Kn1c3q2 ; 25/02/2011	Non-Reporting ltr (1st):	
	CS/CTI20008563/Avf3q2 ; 15/08/2020	Non-Reporting ltr (2nd):	
	NA/MSG15013069/r3 ; 03/08/2015	Non-Reporting ltr (Final):	
	NA/TMI20008527/z4 ; 15/08/2020	Notification ltr (if non-pickup):	
	NA/TMI21004497/r3 ; 08/04/2021	Call OI:	
	SHD 3806G - CS/FCI16021111/R1qh3n2 ; 29.10.2016	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:		☐
Post-Repair Photos:	☐	☐
Others:	☐	☐

PRELIMINARY ADVICE Date/Time: _____   Sent By: _____

FINALIZATION Date/Time: _____   Confirm with: _____   Confirm by: _____

Repair Cost: **L/SUM**   S$ **5,500.00** (**6** days) Reduction: **56** %   Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: **17/11/2022** Confirm with **Hui Xin**   Email ✓ Call ☐

Final Liability:	% **100** (Agreed / Assessed) BOLA S/N No. : **27**	If NO or B 28, Ass. Lia :
Repair Cost: **w/GST**	S$ **5,885.00**	
Loss of Rental (LOR):	S$ ___ (days)	
Loss of Use (LOU):	S$ **700.00** ($**100** x **7** days)	
Loss of Income (LOI):	S$ ___ ($ x days)	
LOR only ☐ LOU only ✓ LOR + LOU ☐ LOR + LOI ☐	[**Tick only one**]	
GIA/LTA Search	S$ **31.00**	
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: **$350.00**
Total:	S$ **6,616.00** Global Sum S$: **6,600.00**	

FINAL PAYMENT Date/Time: _____   Confirm with: _____   Email ✓ Call ☐

Payee 1:	S$ **6,600.00**	Name 1:	**N-51 Automotive Pte Ltd**
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	