

ASSIGNMENTSurveyor: **XING GUO QIANG**DOI: **19.05.2022**Date / Time : **19.05.2022**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **SMY 9559K**

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$D.O.A : **19/05/2022 02:20**Place of Accident : **Stamford Rd, Singapore**

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

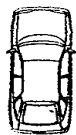
If NO, Driver Name / Age : _____

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

Driver Tel No. : _____

(V/L: YES / NO)

Insured Liability : _____ %

Final ? Yes / No**SHC 813K**

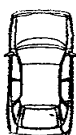
INSRS:

WSP: **CDGE LOYANG**

Tel : _____

Liability : _____

RMKS: _____



INSRS:

WSP: _____

Tel : _____

Liability : _____

RMKS: _____



INSRS:

WSP: _____

Tel : _____

Liability : _____

RMKS: _____



INSRS:

WSP: _____

Tel : _____

Liability : _____

RMKS: _____

Date/ Time

SHC 813K Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By
 CC3/AIG09024807/Cn1q1n 04/03/2010 SHC 813K SJR 7102E 01/11/2009 09/03/2010 CPH
 CC3/AIG13013445/Ysa3y 20/11/2013 SHC 813K SGE 5157P 23/07/2013 22/11/2013 HMK
 CS/FCI10000825/Fbg1 07/05/2010 SGZ 506M SHC 813K 08/01/2010 07/05/2010 CYY
 CS/QW14009228/Sgbd1 21/05/2014 SHC 813K 04/05/2014 22/05/2014 CKL
 NS/INC10008974/Fa 26/05/2010 SHC 813K SCR 6141G 05/05/2010 27/05/2010 HYN
 NS/INC18002855/K1qbn2 01/03/2018 SHC 813K FY 9030B 10/02/2018 01/03/2018 CKL

SMY 9559K - X**STAGE****DATE / PIC**

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:

Post-Repair Photos:

Others:

PRELIMINARY ADVICE Date/Time: _____

Sent By: _____

FINALIZATION

Date/Time: _____

Confirm with: _____

Confirm by: _____

Repair Cost: **Part by Part** S\$ **4,042.88**(**2** days) Reduction: **39** %Email ☐ Call ☐**FINAL SETTLEMENT**Date/Time: **22/05/2023**Confirm with **Catherine**Email ☒ Call ☐

Final Liability:

% **100**(Agreed / Assessed) BOLA S/N No. : **15**

If NO or B 28, Ass. Lia :

Repair Cost: **with GST**S\$ **4,325.88**

Loss of Rental (LOR):

S\$ **258.94**(**2** days) **@\$129.47**

Loss of Use (LOU):

S\$ (\$ **50** x **2** days)

Loss of Income (LOI):

S\$ **100.00** (\$ **50** x **2** days)LOR only ☐ LOU only ☐LOR + LOU ☐LOR + LOU ☒

[Tick only one]

GIA/LTA Search

S\$ **2.00**

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

1) Claim status: Normal/Reject/Private Settlement

2) Report Format: **TP**3) Survey fee: **\$400****Total:**S\$ **4,686.82****Global Sum S\$:****FINAL PAYMENT**

Date/Time: _____

Confirm with: _____

Email ☒ Call ☐

Payee 1:

S\$ **4,686.82**

Name 1:

COMFORTDELGRO ENGINEERING PTE LTD

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3: