

INS. CASE OWNER:

ASSIGNMENT

Surveyor:

ADRIAN

DOI:

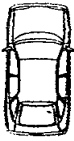
06/07/2022

Date / Time :

06/07/2022

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : SHD 3275M

Claim No. :

S2M045X5

Name of Insured :

COMFORT TRANSPORTATION PTE LTD

Policy No. :

P2465679

Insured Tel No. :

HP:

Make / Model :

Excess Sec II :\$

D.O.A : 05/07/2022

Place of Accident :

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

Driver Tel No. :

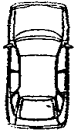
(V/L: YES / NO)

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

Insured Liability :

%

Final ? Yes / No

GBL 1468R

INSRS:

WSP:

Tel :

Liability :

RMKS:

N-51
AUTOMOTIVE
PL

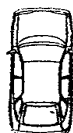
INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time			
	<u>GBL 1468R</u>	<u>NA/GT122006417/r3 ; 05/07/2022</u>	STAGE
	<u>SHD 3275M</u>	<u>CC3/AIG13006481/H1g2a3w2 ; 03/04/2013</u>	DATE / PIC
		<u>CC3/LCR18003847/R1jb3s2 ; 17/02/2018</u>	Non-Reporting ltr (1st):
		<u>CC4/III16014400/Ueb3q2 ; 31/07/2016</u>	Non-Reporting ltr (2nd):
		<u>CS/FCI15015404/M1gbc2 ; 09/09/2015</u>	Non-Reporting ltr (Final):
		<u>NA/III10001571/r ; 22.01.2010</u>	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: <u>L/SUM</u>	S\$ <u>4,800.00</u>	(<u>5</u> days) Reduction: <u>51</u> %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: <u>09/03/2023</u>	Confirm with <u>Hui Xin</u>	Email ☒ Call ☐
Final Liability:	% <u>100</u>	(Agreed / Assessed) BOLA S/N No. : <u>15</u>	If NO or B 28, Ass. Lia :
Repair Cost: <u>7% GST</u>	S\$ <u>5,136.00</u>		
Loss of Rental (LOR):	S\$ <u>642.00</u>	(<u>6</u> days) X \$100 <u>7% GST</u>	
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\$ <u>7.45</u>		
Medical:	S\$		1) Claim status: Normal/Reject/Private Settlement
Disbursement:	S\$ <u>100.00</u>	(e.g. Tow/Independent)	2) Report Format: <u>TP</u>
Legal Cost	S\$		3) Survey fee: <u>\$350.00</u>
Total:	S\$ <u>5,885.45</u>	Global Sum S\$: 5,880.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒ Call ☐
Payee 1:	S\$ <u>5,880.00</u>	Name 1: <u>N-51 Automotive Pte Ltd</u>	
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	