

INS. CASE OWNER:

ASSIGNMENTSurveyor: **ADRIAN**

DOI: _____

Date / Time : **22/09/2022**

Registered in Merimen: _____

Pre-assign / CCU / FTEInsured Vehicle No. : **SHC 3005G**Claim No. : **S2M04BFY**Name of Insured : **COMFORT TRANSPORTATION PTE LTD**Policy No. : **P2465679**

Insured Tel No. : _____ HP: _____

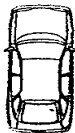
Make / Model : **Hyundai Ae ioniq**Excess Sec II : \$ _____ D.O.A : **20/09/2022 15:45**Place of Accident : **Geylang East Ave 2, Singapore**

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

If NO, Driver Name / Age : **CHENG HENG WOO**

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

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

Insured Liability : % **Final ? Yes / No****GBA 1672A**INSRS:
WSP: **MG SOLUTION**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
GBA 1672A - X			
SHC 3005G - Reference Entry	Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By	Non-Reporting ltr (1st):	
CC3/AtG08019349/VDI 21/07/2008 SHC 3005G SCW 1606P 30/06/2008 28/07/2008 TFC		Non-Reporting ltr (2nd):	
NS/INC11022575/H1y1m 28/11/2011 SHC 3005G SGD 3360L 02/11/2011 05/12/2011 TWL		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\$ 4,600.00 (6 days) Reduction: 56 %		Email ☐ Call ☐	
FINAL SETTLEMENT Date/Time: 30/06/2023 Confirm with Ms Wong		Email ☒ Call ☐	
Final Liability: % 80 (Agreed / Assessed) BOLA S/N No. : NIL		If NO or B 28, Ass. Lia :	
Repair Cost: 4,968.00 S\$ 3,974.40 8%GST			
Loss of Rental (LOR): S\$ _____ (_____ days)			
Loss of Use (LOU): 560.00 S\$ 448.00 (\$ 80 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\$ 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\$ 4,429.85 Global Sum S\$: 4,400.00			
FINAL PAYMENT Date/Time:	Confirm with:	Email ☐ Call ☐	
Payee 1: S\$ 4,400.00	Name 1: MG Solution Pte Ltd		
Payee 2: (Strike if N.A.) S\$ _____	Name 2: _____		
Payee 3: (Strike if N.A.) S\$ _____	Name 3: _____		