

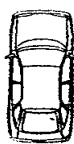
ASSIGNMENT

Surveyor: _____

DOI: _____

Date / Time : **23.09.2022**

Registered in Merimen: _____

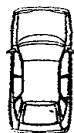
Pre-assign / CCU / FTEInsured Vehicle No. : **SH 7350B**Claim No. : **S2M04BIP**Name of Insured : **COMFORT TRANSPORTATION PTE LTD**Policy No. : **P2465679**

Insured Tel No. : _____ HP: _____

Make / Model : **Hyundai Ae ioniq****Excess Sec II :S\$** _____ **D.O.A :** **22/09/2022 07:50**Place of Accident : **Punggol Rd, Singapore**Is driver the owner? (YES / NO) Nature of Accident : **TOWARDS AND MO KIO AVENUE 5**If **NO**, Driver Name / Age : **SYED IDROS BIN SYED HAMID ALKAFF**

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

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

Insured Liability : % **Final ? Yes / No****PC 5347L**INSRS:
WSP: **HD Perfect**
Tel : **Autowork Pte Ltd**
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
PC 5347L - X			
SH 7350B - Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date		Non-Reporting	
CC3/AIG16005063/H1ja3n2 29/04/2016 SH 7350B YN 9126S 15/03/2016 29/04/2016 LVR		Non-Reporting ltr (1st):	
CC3/AIG16007429/H1za3s2 20/06/2016 SH 7350B SKL 8386R 20/04/2016 20/06/2016 HMK		Non-Reporting ltr (2nd):	
CC3/FC115014428/Kqbc2 16/09/2015 SHD 9862D SH 7350B 26/05/2015 17/09/2015 FWL		Non-Reporting ltr (Final):	
CC6/CT120001839/Dpa3q2 29/04/2021 SH 7350B CB 7174P 25/01/2020 30/04/2021 HMK		Notification ltr (if non-pickup):	
NBA/CT120001606/Y 30/01/2020 NIU XIWEI CB 7174P SH 7350B 25/01/2020 20/02/2020 KCM		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: 74 %		Email ☐ Call ☐	
FINAL SETTLEMENT Date/Time: 02/03/2023 Confirm with: Irene		Email ☒ Call ☐	
Final Liability: % 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :	
Repair Cost: S\$ 4,600.00			
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\$ 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\$ 5,307.45 Global Sum S\$: 5,300.00			
FINAL PAYMENT Date/Time: _____ Confirm with: _____ Email ☒ Call ☐			
Payee 1: S\$ 5,300.00 Name 1: HD PERFECT AUTOWORK PTE LTD			
Payee 2: (Strike if N.A.) S\$ _____ Name 2: _____			
Payee 3: (Strike if N.A.) S\$ _____ Name 3: _____			