

INS. CASE OWNER:

ASSIGNMENT

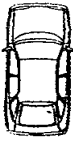
Surveyor:

RASUL

DOI:

Date / Time : **12/10/2022**

Registered in Merimen:

Pre-assign / CCU / FTEInsured Vehicle No. : **SHC 3426A**Claim No. : **S2M04CQ6**Name of Insured : **COMFORT TRANSPORTATION PTE LTD**Policy No. : **P2465679**

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$D.O.A : **05/10/2022 21:21**Place of Accident : **CHANGI AIRPORT T3 TAXI QUEUE**

Is driver the owner? (YES / NO)

Nature of Accident : _____

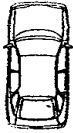
If NO, Driver Name / Age :

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

Driver Tel No. :

(V/L: YES / NO)

Insured Liability : _____ %

Final ? Yes / No**SHB 5329P**INSRS:
WSP: **STRIDES**Tel :
Liability :
RMKS:INSRS:
WSP:Tel :
Liability :
RMKS:INSRS:
WSP:Tel :
Liability :
RMKS:INSRS:
WSP:Tel :
Liability :
RMKS:

Date/ Time	Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By	STAGE	DATE / PIC
SHB 5329P -	CC3/AIG13009816/R1b1n3q2 10/07/2013 SHB 5329P SJM 186K 30/05/2013 11/07/2013 MRB	Non-Reporting ltr (1st):	
	CC3/AIG15012166/K1ya3s2 30/09/2015 SHB 5329P SJR 6969C 16/07/2015 02/10/2015 NKQ	Non-Reporting ltr (2nd):	
	CC3/AIG20010430/Qpa3q2 12/01/2021 SHB 5329P SMQ 8280L 23/09/2020 12/01/2021 KCY	Non-Reporting ltr (Final):	
	CC3/AXA14025213/K1kde3q2 05/02/2015 SHB 5329P SGS 3111K 26/10/2014 09/02/2015 LSL1	Notification ltr (if non-pickup):	
	CS/TIT10019575/T1j1 04/10/2010 SHB 5329P 16/07/2010 07/10/2010 NSC	Call OI:	
	CS/TMI13017854/R1vm3d1 18/11/2013 SHB 5329P SGY 9916J 24/09/2013 20/11/2013 BPL	After call ltr to OI:	
	NA/AIG12006175/w1 28/03/2012 LORNA FATIMA PAQUERETTE LAW SJR 4049X SHB 5329P 27/03/2012 30/03/2012 LCH		
	NA/III10008394/s1 30/04/2010 CHEN QIANMING SJM 4702U SHB 5329P 30/04/2010 03/05/2010 SL		
	NS/INC14019116/M1vj3d1 03/11/2014 SHB 5329P SJY 7218T 07/10/2014 03/11/2014 KYP		
SHC 3426A -	Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By	Documentation	Check List: Handler Typist
	CC3/AIG15012172/H1ha3q2 11/08/2015 SHC 3426A SJE 3655X 18/07/2015 14/08/2015 NKQ	Non-Reporting ltr (if non-pickup)	☐ ☐
	CC3/EQ114023616/H1sm3q2 15/04/2015 SHC 3426A SCQ 3236S 18/12/2014 17/04/2015 BPL	After call ltr to OI:	☐ ☐
	CS/FC117007540/h3XX 18/04/2017 SKE 7794P SHC 3426A 07/04/2017 31/07/2017 CO	Authorisation To Act:	☐ ☐
	NA/MSG11007324/w1 20/04/2011 LIM JIE HUI SFR 6055L SHC 3426A 17/03/2011 26/04/2011 LCH	Release Voucher:	☐ ☐
	NS/INC11007426/H1qg1 23/05/2011 SHC 3426A SGQ 2771Y 19/04/2011 24/05/2011 SSC	Final Repair Bill:	☐ ☐
	NS/INC11007855/H1qn 26/05/2011 SHC 3426A CB 6613X 26/04/2011 26/05/2011 SSC	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:	S\$ _____ (_____ days) Reduction: _____ %	Email ☐ Call ☐	
FINAL SETTLEMENT	Date/Time: _____ Confirm with _____	Email ☐ Call ☐	
Final Liability:	% _____ (Agreed / Assessed) BOLA S/N No. :	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ _____		
Loss of Rental (LOR):	S\$ _____ (_____ days)		
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\$ _____		
Medical:	S\$ _____	1) Claim status: Normal/Reject/Private Settle	
Disbursement:	S\$ _____ (e.g. Tow/ Independent)	2) Report Format:	
Legal Cost	S\$ _____	3) Survey fee:	
Total:	S\$ _____ Global Sum S\$:		
FINAL PAYMENT	Date/Time: _____ Confirm with: _____	Email ☐ Call ☐	
Payee 1:	S\$ _____ Name 1: _____		
Payee 2: (Strike if N.A.)	S\$ _____ Name 2: _____		
Payee 3: (Strike if N.A.)	S\$ _____ Name 3: _____		