15/5/2010

INS. CASE OWNER:

CC4/GRB22010302/Tya3q2

LKK:

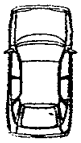
IDAC:

ASSIGNMENT

Surveyor: Taufikh DOI: 17/10/2022 Date / Time : 17.10.2022

Registered in Merimen: 14.10.2022 BY WKSP

Pre-assign / CCU / FTE



Insured Vehicle No. : SNC 5078L Claim No. :

Name of Insured : GRAB RENTALS PTE LTD Policy No. :

Insured Tel No. : HP: Make / Model :

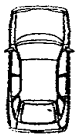
Excess Sec II :S$ D.O.A : 13.10.2022 Place of Accident :

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

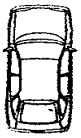
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

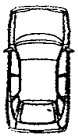
SH 6598K → → →



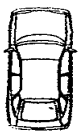
INSRS:
WSP: CDGE
Tel : LOYANG
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		
SH 6598K - Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By		**STAGE** **DATE / PIC**
~~CS/FCI10025952/Rfg1 18/02/2011 SGX 2492R SH 6598K 22/12/2010 23/02/2011 LPY~~		Non-Reporting ltr (1st):
~~NS/INC20014343/T1vf3e2 26/01/2021 SH 6598K SFH 9787R 21/12/2020 28/01/2021 LST~~		Non-Reporting ltr (2nd):
SNC 5078L - X		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$ 4,400.00 (3 days) Reduction: 33 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 09/06/2023	Confirm with Aileen	Email ☑ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 15	If NO or B 28, Ass. Lia :
Repair Cost: with GST	S$ 4,708.00		
Loss of Rental (LOR):	S$ 689.70 (5.5 days) @$125.40		
Loss of Use (LOU):	S$ ($ x days)		
Loss of Income (LOI):	S$ 220.00 ($ 40 x 5.5 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: $350
Total:	**S$** 5,625.15	**Global Sum S$:**	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☑ Call ☐
Payee 1:	S$ 5,625.15	Name 1: COMFORTDELGRO ENGINEERING PTE LTD	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	