			LKK:
INS. CASE OWNER:	**HO Winnie**	**CC4/ASM22011112/Kpa3**	IDAC: **289979**

ASSIGNMENT

Surveyor:	**KENNETH**	DOI: **08/11/2022**	Date / Time : **07/11/2022**
			Registered in Merimen:

Pre-assign / CCU / FTE
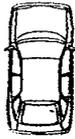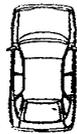
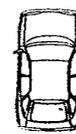|			
Insured Vehicle No.	: **SHA 2019J**	Claim No. :	**S2M04E6J**
Name of Insured	: **COMFORT TRANSPORTATION PTE LTD**	Policy No. :	**P2465679**
Insured Tel No.	: HP:	Make / Model :	
Excess Sec II :S$	D.O.A : **03/11/2022 19:45**	Place of Accident :	**TOWARDS GEYLANG ROAD**
Is driver the owner?	(YES / NO) Nature of Accident :		
If **NO**, Driver Name / Age : **GOH CHEE HONG**		OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO	
Driver Tel No. :	(V/L: YES / NO)	Insured Liability : % **Final ? Yes / No**	

SLS 4896M → → →
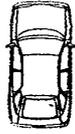
INSRS:	INSRS:	INSRS:	INSRS:
WSP: **Thiam Heng**	WSP:	WSP:	WSP:
Tel : **Huat Pte Ltd**	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time		STAGE	DATE / PIC
SLS 4896M - X			
SHA 2019J - Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By		Site Assessment:	
CC3/AIG09019570/Cju1 09/10/2009 SHA 2019J SDW 5151X 29/08/2009 14/10/2009 CPH		Non-Reporting ltr (2nd):	
CC3/AIG10016273/Fn1f2r1 27/11/2010 SHA 2019J SJP 5251G 16/08/2010 30/11/2010 IIC		Non-Reporting ltr (Final):	
CC3/AIG17002491/H1zb3q2 29/03/2017 SHA 2019J SFM 333A 05/02/2017 04/04/2017 LSP		Notification ltr (non-pickup):	
CC3/LCR17014347/K1zb3q2 12/10/2017 SHA 2019J SLG 4157B 22/07/2017 17/10/2017 LSP		CCU:	
CD3/AIG09019570/M 02/09/2009 SHA 2019J SDW 5151X 29/08/2009 25/09/2009 KPW		CCY:	
CS/FCI17002443/Agh3n2 17/03/2017 SFM 333A SHA 2019J 05/02/2017 20/03/2017 CCY			
CS/FCI19014546/Ktf3n2 23/10/2019 SJW 411H SHA 2019J 17/08/2019 23/10/2019 ATS			

Documentation Check List: Handler Typist

	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:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE	Date/Time:	Sent By:	

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: **L/SUM**	S$ **2,600.00** (**4** days) Reduction: **79** %		Email Call

FINAL SETTLEMENT	Date/Time: **06/03/2023** Confirm with **STEVEN**		Email ✓ Call
Final Liability:	% **100** (Agreed / Assessed) BOLA S/N No. : **15**		If NO or B 28, Ass. Lia :
Repair Cost: **7% GST**	S$ **2,782.00**		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ **300.00** ($ **60** x **5** 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: **$350.00**
Total:	S$ **3,089.45** **Global Sum S$:**		

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ✓
Payee 1:	S$ **3,089.45**	Name 1: **THIAM HENG HUAT PTE LTD**	
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	