15/5/2010

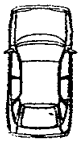
INS. CASE OWNER: OH Vale | CC4/ASM23000122/pa3 | LKK: IDAC: 298574

ASSIGNMENT

Surveyor: _____ DOI: _____ Date / Time : 04/01/2023

Registered in Merimen: _____

Pre-assign / CCU / FTE



Insured Vehicle No. : SH 6991H | Claim No. : S3M04HDI

Name of Insured : COMFORT TRANSPORTATION PTE LTD | Policy No. : P2465679

Insured Tel No. : _____ HP: _____ | Make / Model : Hyundai I40

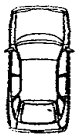
Excess Sec II :S$ _____ D.O.A : 31/12/2022 09:00 | Place of Accident : Jurong West Central 3, Singapore

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

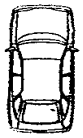
If **NO**, Driver Name / Age : | OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

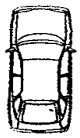
SJU 4771C → _____ → _____ → _____



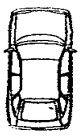
INSRS:
WSP: Chia Auto Services Pte Ltd
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
SJU 4771C - X		Non-Reporting ltr (1st):	
SH 6991H -	Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By	Non-Reporting ltr (2nd):	
	CC4/ASM21012721/Uea3q2 07/07/2022 JNG 6961 SH 6991H 30/11/2021 20/07/2022 HMK	Non-Reporting ltr (Final):	
	CS/LAW11024002/M1qtk3 22/12/2011 SGH 9751G SH 6991H 11/03/2011 21/12/2011 SSC	Notification ltr (if non-pickup):	
	CS3/III20008038/Etf3e2 30/09/2020 SMG 3410P SH 6991H 02/08/2020 02/10/2020 LST1	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:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: L/SUM S$ 4,300.00 (5 days) Reduction: 69 % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 08/03/2023 Confirm with Ms Wong Email ☑ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 27		If NO or B 28, Ass. Lia :
Repair Cost: 8% GST	S$ 4,644.00		
Loss of Rental (LOR):	S$ (days)		
Loss of Use (LOU):	S$ 350.00 ($50 x 7 days)		
Loss of Income (LOI):	S$ ($ x days)		
LOR only ☐ LOU only ☑ LOR + LOU ☐ LOR + LOI ☐ [**Tick only one**]			
GIA/LTA Search	S$ 26.75		
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: $350.00
Total:	**S$** 5,020.75	**Global Sum S$:**	

FINAL PAYMENT Date/Time: Confirm with: Email ☑ Call ☐

Payee 1:	S$ 5,020.75	Name 1:	CHIA AUTO SERVICES PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	