

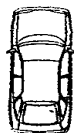
ASSIGNMENT

Surveyor: _____ DOI: _____ Date / Time : **02.02.2023**
 Registered in Merimen: _____

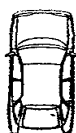
Pre-assign / CCU / FTE

Insured Vehicle No. : **SH 6222U** Claim No. : **S3M04IQW**
 Name of Insured : **COMFORT TRANSPORTATION PTE LTD** Policy No. : **P2478218**
 Insured Tel No. : _____ HP: _____ Make / Model : _____
Excess Sec II :S\$ _____ D.O.A : **31/01/2023 19:31** Place of Accident : **Tampines Street 71, Singapore**
 Is driver the owner? (YES / NO) Nature of Accident : **TWDS TAMPINES AVE 5**

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**

SLN 3613X

INSRS:
WSP: **SM**
Tel : **AUTOMOTIVE**
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	DATE / PIC
SLN 3613X -	CS/AGI22009318/Gcy3 21/09/2022 SMN 3664L SLN 3613X 20/09/2022 NMY	Non-Reporting ltr (1st):	
SH 6222U -	CC3/AIG17017366/K1ka3q2 25/10/2017 SH 6222U SFY 5838P 04/09/2017 25/10/2017 HMK	Final):	
	CC3/III17017213/R1hb3q2 13/02/2018 SFY 5838P SH 6222U 04/09/2017 15/02/2018 LSP	(If non-pickup):	
	CC4/III17003528/T1ua3q2 13/11/2017 GBA 2921A SH 6222U 15/02/2017 16/11/2017 HMK		
	CC4/III20001370/Qpa3q2 05/05/2020 SHC 4786D SH 6222U 16/01/2020 06/05/2020 HMK		
	CS3/ASM21005826/Gqce2 27/05/2021 SEG 1417S SH 6222U 08/05/2021 27/05/2021 HMK		
	NA/INC10011943/s1 21/06/2010 MOHD NOOR BIN ARSAT SBU 4956G SH 6222U 20/06/2010 22/06/2010 SLPTypist		
	NBA/MSG17013256/J 05/07/2017 TING CHENG KWEE SKW 4650X SH 6222U 05/07/2017 17/07/2017 RDH		
	NBA/RSI14006922/s4 14/04/2014 MOHAMED ZULKARNAIN BIN ROSLI FBJ 3347D SH 6222U 13/04/2014 17/04/2014 SAM		
		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: /sum	S\$ 3,000.00 (3 days) Reduction: 73 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 15/05/2023 Confirm with SUKYI		Email ☒ Call ☐
Final Liability:	% 50 (Agreed / Assessed) BOLA S/N No. : 19		If NO or B 28, Ass. Lia :
Repair Cost: 3,240.00	S\$ 1,620.00 8%GST		
Loss of Rental (LOR):	S\$ (days)		
Loss of Use (LOU): 150.00	S\$ 75.00 (\$ 50 x 3 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\$ 1,721.75	Global Sum S\$: 1,700.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒ Call ☐
Payee 1:	S\$ 1,700.00	Name 1: SM Automotive	
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	