15/5/2010

INS. CASE OWNER: TEO Kitty

CC4/HSB23001167/pa3

LKK:

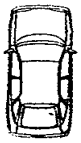
IDAC: 301714

ASSIGNMENT

Surveyor: _____ DOI: _____ Date / Time : 01.02.2023

Registered in Merimen: _____

Pre-assign / CCU / FTE



Insured Vehicle No. : SHA 3929B Claim No. : S3M04IHK

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

Insured Tel No. : _____ HP: _____ Make / Model : Toyota Prius

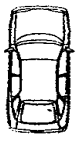
Excess Sec II :S$ _____ D.O.A : 26/01/2023 12:10 Place of Accident : New Upper Changi Rd, Singapore

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

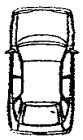
If **NO**, Driver Name / Age : TAN YUNG CHIANG OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

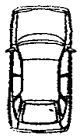
SLH 8293J → _____ → _____ → _____



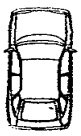
INSRS:
WSP: TEAMWORK GARAGE PTE LTD
Tel :
Liability:
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
SHA 3929B -	Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By NS/INC10003836/Gn 02/04/2010 SHA 3929B SGJ 4948D 20/02/2010 01/04/2010 YYF	Non-Reporting ltr (1st):	
SLH 8293J -	Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By CC4/EQI18011072/Keb3q2 30/11/2018 SJU 1279C SLH 8293J 12/06/2018 30/11/2018 LSP	Non-Reporting ltr (2nd):	
	CS/INC17000278/Dgh3n2 08/03/2017 SLH 8293J SJU 1781T 03/01/2017 09/03/2017 CCY	Non-Reporting ltr (Final):	
	CS/MSG17013910/Dgbn2 16/11/2017 SLH 8293J SGJ 2130J 17/07/2017 17/11/2017 CKL	Notification ltr (if non-pickup):	
	NA/EQI18006636/z4 10/04/2018 SIM KOK POH SLH 8293J SBS 5150T 06/04/2018 13/04/2018 HZT	Call OI:	
	NA/EQI18014069/k4 02/08/2018 SIM KOK POH SLH 8293J SJU 1279C 12/06/2018 06/08/2018 KSG	After call ltr to OI:	
	NA/INC17000084/s4 03/01/2017 CHUA SWEE CHEONG SLH 8293J SJU 1781T 03/01/2017 09/04/2017 HMF		
	NA/INC17006754/s4 06/04/2017 CHUA SWEE CHEONG SLH 8293J SHB 1868B 05/04/2017 10/04/2017 HMF		
	NA/INC17013815/h4 20/07/2017 CHUA SWEE CHEONG SLH 8293J SGJ 2130J 17/07/2017 21/07/2017 LSP		

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:	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:		