

INS. CASE OWNER:

**ASSIGNMENT**

Surveyor: \_\_\_\_\_ DOI: \_\_\_\_\_ Date / Time : **08/02/2023**  
Registered in Merimen: \_\_\_\_\_

**Pre-assign / CCU / FTE**



Insured Vehicle No. : **SHD 3808B** Claim No. : **S3M04IPU**  
Name of Insured : **COMFORT TRANSPORTATION PTE LTD** Policy No. : **P2478218**  
Insured Tel No. : \_\_\_\_\_ HP: \_\_\_\_\_ Make / Model : \_\_\_\_\_  
Excess Sec II :\$ D.O.A : **18/01/2023 14:30** Place of Accident : **TUAS BEFORE SIMEI EXIT**  
Is driver the owner? ( YES / NO ) Nature of Accident : \_\_\_\_\_

If NO, Driver Name / Age : **DENNIS HO CHEE KEONG (DENNIS HE ZHIQIANG)** OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO  
Driver Tel No. : \_\_\_\_\_ (V/L: YES / NO ) Insured Liability : % **Final ? Yes / No**

**SML 3999G**



INSRS: **FORZA**  
WSP: **AUTOHAUS**  
Tel : **PTE. LTD.**  
Liability :  
RMKS:



INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:



INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:



INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:

Date/ Time	STAGE	DATE / PIC
<b>SML 3999G - X</b>		
<b>SHD 3808B - Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close</b>	<b>Non-Reporting Itr (1st):</b>	
CC3/AIG11018617/H1sg2q2 07/11/2012 SHD 3808B SGP 2345Z 08/09/2011 12/11/2012	<b>Non-Reporting Itr (2nd):</b>	
CC3/AIG15014457/H1wa3c2 30/10/2015 SHD 3808B SKS 9525M 22/08/2015 03/11/2015	<b>Non-Reporting Itr (Final):</b>	
CC3/CTH16007101/H1wb3n2 08/06/2016 SHD 3808B SJX 9527T 16/04/2016 09/06/2016	<b>Notification Itr (if non-pickup):</b>	
CS/ECI16000474/M1fbc2 07/04/2016 SHC 2460G SHD 3808B 05/01/2016 08/04/2016	<b>Call OI:</b>	
CS/FCI15014585/T1vbd1 10/09/2015 YL 5728S SHD 3808B 22/08/2015 17/09/2015	<b>After call Itr to OI:</b>	
NA/INC12014010/z 18/07/2012 LOH KIA CHIN SGS 8942X SHD 3808B 18/07/2012 20/07/2012	<b>Authorisation To Act:</b>	
NBA/EQI15014393/e1 24/08/2015 TAN HAI HENG YL 5728S SHD 3808B 22/08/2015 02/09/2015	<b>Release Voucher:</b>	
NS/INC12014128/H1qn 01/08/2012 SHD 3808B SGS 8942X 18/07/2012 31/07/2012	<b>Final Repair Bill:</b>	
	<b>Car Rental Invoice:</b>	
	<b>Towing Invoice</b>	
	<b>LTA / GIA :</b>	
	<b>Medical Bill:</b>	
	<b>PIR:</b>	
	<b>Mandate/Reject Instruction:</b>	
	<b>LOD</b>	
	<b>Payment Breakdown Form:</b>	
<b>PRELIMINARY ADVICE</b> Date/Time: _____ Sent By: _____	<b>Post-Repair Photos:</b>	
	<b>Others:</b>	
<b>FINALIZATION</b> Date/Time: _____ Confirm with: _____ Confirm by: _____		
Repair Cost: <b>L/SUM</b> S\$ <b>3,250.00</b> ( <b>5</b> days) Reduction: <b>57</b> %	Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>	
<b>FINAL SETTLEMENT</b> Date/Time: <b>15/05/2023</b> Confirm with <b>MIKE</b>	Email <input checked="" type="checkbox"/> Call <input type="checkbox"/>	
Final Liability: % <b>100</b> (Agreed / Assessed) BOLA S/N No. : <b>27</b>	If NO or B 28, Ass. Lia :	
Repair Cost: <b>8%GST</b> S\$ <b>3,510.00</b>		
Loss of Rental (LOR): S\$ _____ ( _____ days)		
Loss of Use (LOU): S\$ <b>300.00</b> (\$ <b>50</b> x <b>6</b> days)		
Loss of Income (LOI): S\$ _____ (\$ _____ x _____ days)		
LOR only <input type="checkbox"/> LOU only <input checked="" type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/> [Tick only one]		
GIA/LTA Search S\$ <b>26.75</b>		
Medical: S\$ _____	1) Claim status: Normal/Reject/Private Settle	
Disbursement: S\$ _____ (e.g. Tow/ Independent )	2) Report Format: <b>TP</b>	
Legal Cost S\$ _____	3) Survey fee: <b>\$350.00</b>	
<b>Total:</b> S\$ <b>3,836.75</b> <b>Global Sum S\$:</b>		
<b>FINAL PAYMENT</b> Date/Time: _____ Confirm with: _____ Email <input type="checkbox"/> Call <input type="checkbox"/>		
Payee 1: S\$ <b>3,836.75</b> Name 1: <b>FORZA AUTOHAUS PTE. LTD.</b>		
Payee 2: (Strike if N.A.) S\$ _____ Name 2: _____		
Payee 3: (Strike if N.A.) S\$ _____ Name 3: _____		