15/5/2010

INS. CASE OWNER:

CC3/CTI23002325/Tpa3

LKK:

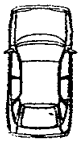
IDAC:

## ASSIGNMENT

Surveyor: TAUFIKH DOI: 03/01/2023 Date / Time : 03/01/2023

Registered in Merimen: ———

**Pre-assign / CCU / FTE**



Insured Vehicle No. : PA 7979K Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

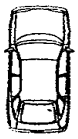
**Excess Sec II :S$** D.O.A : 31.12.2022 12:20 Place of Accident : Pioneer Road North

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

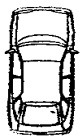
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

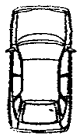
SH 6673B → → →



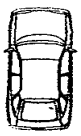
INSRS:
WSP: CDGE
Tel : LOYANG
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

| Date/ Time | | STAGE | DATE / PIC |
|---|---|---|---|
| SH 6673B - | Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By<br>CC3/AIG13012494/M1a2a3y 06/08/2013 SH 6673B SFW 6479X 07/07/2013 07/08/2013 HMK<br>CC4/III17002405/T1hb3s2 14/09/2017 GBD 9065J SH 6673B 04/02/2017 15/09/2017 LSH1<br>NS/INC22003740/Vtcn2 18/05/2022 SH 6673B FBR 7278B 13/04/2022 19/05/2022 EWL | | Non-Reporting ltr (1st): |
| | | | Non-Reporting ltr (2nd): |
| | | | Non-Reporting ltr (Final): |
| PA 7979K - | Reference Entry Date Customer Name Vehicle No. TP Vehicle No. Accident Date Close Date Created By<br>NJA/INC09001430/k1 19/01/2009 TENG KIM WHATT PA 7979K YL 4210A 16/01/2009 19/02/2009 LLL | | Notification ltr (if non-pickup): |
| | | | 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: | |
| **PRELIMINARY ADVICE** | Date/Time: Sent By: | Post-Repair Photos: | |
| | | Others: | |

| | | | |
|---|---|---|---|
| **FINALIZATION** | Date/Time: | Confirm with: | Confirm by: |
| Repair Cost: L/SUM | S$ 1,350.00 ( 2 days) Reduction: 66 % | | Email ☐ Call ☐ |
| **FINAL SETTLEMENT** | Date/Time: 16/06/2023 Confirm with Catherine | | Email ☑ Call ☐ |
| Final Liability: | % 100 (Agreed / Assessed) BOLA S/N No. : NIL | | If NO or B 28, Ass. Lia : |
| Repair Cost: 8%GST | S$ 1,458.00 | | |
| Loss of Rental (LOR): | S$ 574.75 ( 5 days) X $114.95 | | |
| Loss of Use (LOU): | S$ ($ x days) | | |
| Loss of Income (LOI): | S$ 250.00 ($ 50 x 5 days) | | |
| LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ☑ [**Tick only one**] | | | |
| GIA/LTA Search | S$ 2.00 | | |
| 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: $400.00 |
| **Total:** | **S$** 2,284.75 **Global Sum S$:** | | |

| | | | |
|---|---|---|---|
| **FINAL PAYMENT** | Date/Time: | Confirm with: | Email ☐ Call ☐ |
| Payee 1: | S$ 2,284.75 | Name 1: | ComfortDelGro Engineering Pte Ltd |
| Payee 2: (Strike if N.A.) | S$ | Name 2: | |
| Payee 3: (Strike if N.A.) | S$ | Name 3: | |