INS. CASE OWNER		CC 3/LCF	R170 77145	, Mpas IDA		x (	,
110.0102011121	Λ λ.		ASSIGNMENT	7	Filila		
Surveyor:	AWK	DOI:	20/11/18	Date / Time :	21	15	
				Registered in Merimen:	-/1[1	1117	
Pre-assign / CCU	FTE CILL 2	lo M					
Insured Vehicle No	54 51	100	Claim No.				
Name of Insured		,	Policy No.				
		IID.	•				
Insured Tel No.		HP:	Make / Mo				
Excess Sec II :S\$		D.O.A: ((-\)	Place of A	ccident :			_
Is driver the owner	? ( YES / NO )	Nature of Accident :					
If NO, Driver Nan				EPORT: YES / NO ; TP GIA I		/NO	
Driver Tel 1	No. :	(V/L: YES / N	NO ) Insured Li	ability: % Fina	1? Yes/No		
SHO 365	<u>₩</u>						
INSRS:	INSRS:	-	INSRS:		INSRS:		
WSP: COLD (	WSP:		WSP:		WSP:		
Tel: Liability:	Tel: Liability	. 1	Tel : Liability	. 8	Tel: Liability:		
RMKS:	RMKS:	1/4 -4/	RMKS:	1/// -1//	RMKS:		
Date/ Time							_
	[1407/02/1 00	C115	) - a/ V	STAGE	DAT	TE / PIC	
	2410267 WY	84 5	Dy. A	Non-Reporting ltr (1st):			
			1	Non-Reporting ltr (2nd): Non-Reporting ltr (Final):			
				Notification ltr (if non-pick	cup):		
				Call OI:			
				After call ltr to OI:			
				Documentation Check Li		Typist	_
				Notification ltr (if non-pick After call ltr to OI:	up)		
				Authorisation To Act:			
				Release Voucher:			
				Final Repair Bill:			
				Car Rental Invoice:			
				Towing Invoice			
				LTA / GIA :			
				Medical Bill: PIR:			
				Mandate/Reject Instructi	on.		
				LOD			
				Payment Breakdown For	m:		
PRELIMINARY ADVICE	Date/Time:	Sent By:		Post-Repair Photos:			
TYNI I Y ZZ I ZYZONI	D . M:			Others:			
FINALIZATION Repair Cost:	Date/Time: S\$ (	Confirm w		Confirm by:	1 Call		
FINAL SETTLEMENT	Date/Time:	days) Reduction: Confirm with	%	Email Call	ICall _		_
Final Liability:		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)	le andre and				_
LOR only LOU only GIA/LTA Search	LOR + LOU LO	OR + LOI [Tic	k only one]				
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 SS:					_
FINAL PAYMENT	Date/Time:	Confirm with:		Email Call			_
Payee 1:	S\$	Name 1:		2747247			
Payee 2: (Strike if N.A.)	S\$	Name 2:	*				
Payee 3: (Strike if N.A.)	S\$	Name 3:					

Sirreyor Kalis					
AS	SSIGNMENT				
From: Date:	Veh No: SHO 3 652H Yr Regn: 28569 /	217			
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Tasi / Prime Mover /				
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or				
To Inspect Vehicle No:	Make: Togota Prin, c.c 1: Colour Blue A/C: Insided/Std/	7 88			
at Workshop m/s					
of	Sp.Reading 26748 T/Radio: Ingred / Std /	NI / NA			
nsured:	Eng/No:				
Policy No.	C/No: \$ JTDKBJF42035	6493			
Claims No.	Gen. Cond: Good / Féir / Poor / Burnt				
Sum Insured: Excess:	Steering: Inor  / Jammed / Leaked / Burnt or	Steering: Inorge / Jammed / Leaked / Burnt or			
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or				
Make of Veh:	Modi: Nil / S/Rim / STDA/Rim or				
· X	Tyre Size: F: 195/65 Rs-				
(Policy Condition)	R: -1				
Remark: The veh had commenced its N/S 0/	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUN	11 /			
repair at the time of inspection.	TOYO/YOKO or				
Bal. or Market Value:	<u>Front</u> <u>Rear</u>				
DAC Accident Rport: Consistent? : Yes or No	R/Bal. 7 mm R/Bal. 7	mm			
GIA / PR Seen: Consistent?: Yes or No	L/Bal. 7 mm L/Bal. 7	mm			
Est. Repairs: days Res.: Yes or No	D.O.A. /4/1/12 D.O.I. 25/1/17				
Lum Sum: % 3 Val.: Yes or No	Survey held at (OhE ((gys))				
CA / REV / REP. / 24 HRS  Vehicle: IN / O	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop o	r			
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to	collision			
Date / Time Action / Instruction					
	AZG				
	PIP				
,					
٦.					
ate/Time, File Pass to? : Preli. Report	Days Of Repair:				
: Final Report	Resurvey No. of Trip: Survey Fee:				
Date/Time, File Return to?	Transportation:				
Add F	ee: : Site Insp (\$ )s+Rs,si				
	: Interview (\$ ) Photos				
Report Format :	: Tech. Invs (\$ ) Others				

Weekend (\$

TOTAL

Lump Sum / I.B.I: (\$

## **Enquire Transfer Fee**

Late renewal fee(s) will be (s) payable.	imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee
CEVS Rebate Utilised Amount	\$27,610.00
CO2 Emission	87.00 (g/km)
ntended Transfer Date	20 Nov 2017
nspection Due Date	27 Mar 2018
PARF Eligibility Expiry Date	27 Sep 2025
Road Tax Expiry Date	27 Mar 2018
COE Expiry Date	27 Sep 2025
PQP Paid	\$35,265.00
COE Category	A - Car up to 1600cc & 97kW (130bhp)
Lifespan Expiry Date	27 Sep 2025
Original Registration Date	28 Sep 2017
Year Of Manufacture	2017
Unladen Weight	1375 kg
Maximum Laden Weight	1790 kg
Maximum Power Output	90.0 kW (120 bhp)
Power Rating	53.0 kW
Engine Capacity	1798 cc
Motor No.	1NMS065891
Engine No.	2ZRS065891
Propellant	Petrol-Electric Petrol-Electric
Chassis No.	JTDKB3FU203564939
Vehicle Model	PRIUS HYBRID 1.8 CVT
Vehicle Make	TOYOTA
Vehicle Scheme	Taxi (Company)
Vehicle Attachment 1	Air-Con (Taxi)
Vehicle Type	H10 - Public Transport Taxi (Motor Car)
Vehicle No.	SHD3652H

	Amount Before GST	GST Amount	Amount After GST	
	(5\$)	(S\$)	(\$\$	
Transfer Fee	11.00	-	11.00	
Total Amount Payable			11.00	
Message				

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Land Transport Authority

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