

INS. CASE OWNER:

Priya

CC6 / III17023433 / Uua3

LKK:

IDAC:

Surveyor:

MARCUS

DOI:

11/12/17

Date / Time:

11/12/17

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SHC 8135G

Claim No.:

Name of Insured:

CTPL

Policy No.:

Insured Tel No.:

HP:

Make / Model:

HYUNDAI I40

Excess Sec II :SS

D.O.A.:

10/12/17

Place of Accident:

MERPATI ROAD IN FRONT
BLK 14

Is driver the owner?

(YES NO)

Nature of Accident:

If NO, Driver Name / Age: TAN CHONG HUAK

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No.:

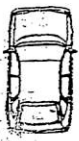
(V/L: YES / NO)

Insured Liability:

%

Final ? Yes / No

SLS 4725Z



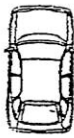
INSRS:

WSP: Hyp motor

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

SLS 4725Z - X

SHC 8135G - CC3/TMI1102153/HIYL DOA: 18/10/11
1 - NBA10561402239714 DOA: 01/12/14

12/12/17 (THIN THEN) * NO ESTIMATE

STAGE

DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

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:

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\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

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:

Survivor

111

Veh No: SL 547256 Yr Regn: 1161

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or (A)

Make: Honda Shuttle C.C. 1496

Colour Green A/C: Insured / Std / NI / NA

Sp. Reading 3680 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: 6128 110*1571

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi : Nil / S/Rim / STD A/Rim or

Tyre Size: F: 185/60R15

Re:

N/S	O/S

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front 2 Rear 2

R/Bal. 2 mm R/Bal. 9 mm

L/Bal. 5 / mm L/Bal. 5 / mm

D.O.A. 10/14/17 D.O.I. 11/12/17

Survey held at 11-1-11

Des. of Damages : Frt. / Rear / O/S / N/S / U/C / Rooftop or

Vehicle: IN / OUT

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

☐: Preli. Report

☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee: ☐ : Site Insp (\$

Site Insp (\$

$$) \quad S + RS, \quad SI$$
☐ Interview (\$

) Photos

Tech. Invs (\$)

) Others

☐ Weekend (\$)

5

Report Format :

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

TOTAL

0% 25% 50% 75% 100%

Register New Vehicle (Acknowledgement)

Vehicle Particulars

Vehicle No.:	SLS4725Z		
Vehicle Type:	P10 - Passenger Motor Car	Vehicle Scheme:	Normal
Vehicle Attachment 1:	No Attachment		
Vehicle Attachment 2:	-	Vehicle Attachment 3:	-
Vehicle Make:	HONDA	Vehicle Model:	SHUTTLE 1.5G A
Chassis No.:	GK81101575	Engine No.:	L15B5001895
Motor No.:	-	Trailer Chassis No.:	-
Propellant:	Petrol	Passenger Capacity:	4
Engine Capacity:	1496 cc	Power Rating:	-
Maximum Power Output:	97.0 kW (130 bhp)		
Unladen Weight:	1130 kg	Maximum Laden Weight:	1405 kg
Primary Colour:	Silver	Secondary Colour:	-
First Registration Date:	26 Sep 2017	Original Registration Date:	26 Sep 2017
Manufacturing Year:	2016	Open Market Value:	\$17,506.00
PARF Eligibility:	Yes	Minimum PARF Benefit:	\$3,753.00
No. of Transfers:	0	Additional Registration Fee Rate:	First \$17,506.00 (100%)
Actual ARF Paid:	\$7,506.00		

Owner Particulars

Owner Name: YEO YOKE GEN

Owner ID Type: Singapore NRIC

Owner ID: S7271967J

Registered Address Type: HDB / HUDC

Registered Block/House No.: 333

Registered Street Name: ANG MO KIO AVENUE 1

Registered Unit No.: # 07 - 1923

Registered Building Name: -

Registered Postal Code: 560333

COE No. / Expiry Date: 2017100101000035H / 25 Sep 2027

COE Bid Category: A - Car up to 1600cc & 97kW (130bhp)

QP Paid: \$36,001.00



Transaction Details

Business Transaction Ref. No.: 20170926111803611950

Business Transaction Date: 26 Sep 2017

Business Transaction Time: 11:18:03

Message

The above vehicle has been successfully registered.

Please note that \$487.00 will be deducted from your GIRO account.

OK

Save as PDF