

Surveyor: XGQ DOI: ASSIGNMENT 11-12-17 Date / Time: 11-12-17  
 Registered in Merimen: \_\_\_\_\_

Pre-assign / CCU / FTE



Insured Vehicle No. : STL 7569 Z Claim No. : \_\_\_\_\_  
 Name of Insured : \_\_\_\_\_ Policy No. : \_\_\_\_\_  
 Insured Tel No. : \_\_\_\_\_ HP: \_\_\_\_\_ Make / Model : \_\_\_\_\_  
 Excess Sec II :SS \_\_\_\_\_ D.O.A : 20/10/17 Place of Accident : \_\_\_\_\_  
 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

SLA 77514 → \_\_\_\_\_ → \_\_\_\_\_ → \_\_\_\_\_



INSRS: \_\_\_\_\_  
 WSP: Trans. Eurokars  
 Tel : \_\_\_\_\_  
 Liability : \_\_\_\_\_  
 RMKS: \_\_\_\_\_



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 WSP: \_\_\_\_\_  
 Tel : \_\_\_\_\_  
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 Tel : \_\_\_\_\_  
 Liability : \_\_\_\_\_  
 RMKS: \_\_\_\_\_

Date/ Time	STAGE	DATE / PIC	
<u>SLA 77514 - 7</u> <u>STL 7569 Z - 3</u> <u>11/12/17 20:15:24</u> <u>DOA: 20/10/2017</u>	Non-Reporting ltr (1st):		
	Non-Reporting ltr (2nd):		
	Non-Reporting ltr (Final):		
	Notification ltr (if non-pickup):		
	Call OI:		
	After call ltr to OI:		
	<b>Documentation Check List:</b>	<b>Handler</b>	<b>Typist</b>
	Notification ltr (if non-pickup)	<input type="checkbox"/>	<input type="checkbox"/>
	After call ltr to OI:	<input type="checkbox"/>	<input type="checkbox"/>
	Authorisation To Act:	<input type="checkbox"/>	<input type="checkbox"/>
	Release Voucher:	<input type="checkbox"/>	<input type="checkbox"/>
	Final Repair Bill:	<input type="checkbox"/>	<input type="checkbox"/>
	Car Rental Invoice:	<input type="checkbox"/>	<input type="checkbox"/>
	Towing Invoice	<input type="checkbox"/>	<input type="checkbox"/>
	LTA / GIA :	<input type="checkbox"/>	<input type="checkbox"/>
Medical Bill:	<input type="checkbox"/>	<input type="checkbox"/>	
PIR:	<input type="checkbox"/>	<input type="checkbox"/>	
Mandate/Reject Instruction:	<input type="checkbox"/>	<input type="checkbox"/>	
LOD	<input type="checkbox"/>	<input type="checkbox"/>	
Payment Breakdown Form:	<input type="checkbox"/>	<input type="checkbox"/>	
<b>PRELIMINARY ADVICE</b> Date/Time: _____ Sent By: _____	Post-Repair Photos:	<input type="checkbox"/> <input type="checkbox"/>	
	Others:	<input type="checkbox"/> <input type="checkbox"/>	
<b>FINALIZATION</b> Date/Time: _____ Confirm with: _____ Confirm by: _____			
Repair Cost: S\$ _____ ( _____ days) Reduction: _____ %	Email <input type="checkbox"/>	Call <input type="checkbox"/>	
<b>FINAL SETTLEMENT</b> Date/Time: _____ Confirm with: _____ Email <input type="checkbox"/> Call <input type="checkbox"/>			
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 <input type="checkbox"/> LOU only <input type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/> [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: _____		
<b>Total:</b> S\$ _____ <b>Global Sum SS:</b> _____			
<b>FINAL PAYMENT</b> Date/Time: _____ Confirm with: _____ Email <input type="checkbox"/> Call <input type="checkbox"/>			
Payee 1: S\$ _____ Name 1: _____			
Payee 2: (Strike if N.A.) S\$ _____ Name 2: _____			
Payee 3: (Strike if N.A.) S\$ _____ Name 3: _____			



## Enquire Transfer Fee

Vehicle Details			
Vehicle No.	SLA7751Y		
Vehicle Type	P10 - Passenger Motor Car		
Vehicle Attachment 1	No Attachment		
Vehicle Scheme	Normal		
Vehicle Make	MAZDA		
Vehicle Model	MAZDA6 4-DOOR SEDAN 2.0L SP.6EAT		
Chassis No.	JM6GJ1072G0231834		
Propellant	Petrol		
Engine No.	PE20746569		
Engine Capacity	1998 cc		
Maximum Power Output	121.0 kW ( 162 bhp)		
Maximum Laden Weight	1935 kg		
Unladen Weight	1454 kg		
Year Of Manufacture	2016		
Original Registration Date	16 Mar 2016		
Lifespan Expiry Date	-		
COE Category	E - Open Category		
Quota Premium	\$48,002.00		
COE Expiry Date	15 Mar 2026		
Road Tax Expiry Date	15 Mar 2018		
PARF Eligibility Expiry Date	15 Mar 2026		
Inspection Due Date	15 Mar 2019		
Intended Transfer Date	12 Dec 2017		
CO2 Emission	138.00 (g/km)		
CEVS Rebate Utilised Amount	-		
Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use <a href="#">Enquire Road Tax Payable</a> for fee(s) payable.			
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.			
Amount Payable			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)