15/5/2010

INS. CASE OWNER: Syaheda | CC 4 / QBE170 24161 / Uja3 | LKK: IDAC:

ASSIGNMENT

Surveyor: MARCUS DOI: 20/12/17 Date / Time : 20/12/17

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : GV 8001X Claim No. : V0011816

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 15/12/17 Place of Accident :

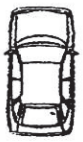
Is driver the owner? (YES / NO) Nature of Accident :

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

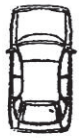
Driver Tel No. : (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SLE 2746A → → →

INSRS:
WSP: Cycle & Carriage (Ubi)
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SLE 2746A - X ; GV 8001X - X

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: 22/12/17 Sent By: Shirley Hsew

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$			1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$		(e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$			3) Survey fee:
Total:	**S$**	**Global Sum S$:**		
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:		

REF: QBE

ASSIGNMENT

From: Date: 20/12/17

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: SLE2746A

at Workshop m/s Cycle & Carriage Fulco Motor

of 330 Ubi Rd 3 , 408650

Insured:

Policy No. GV8001X

Claims No.

Sum Insured: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: **The veh had commenced its repair at the time of inspection.**

N/S	O/S

Bal. or Market Value:

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS 'up'

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SLE2746A Yr Regn: 7/16

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

Truck / Trailer or VA

Make: Mit Lancer Ex c.c 1590

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

Sp.Reading 16252 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: JMYSRCY1AGU005872

Gen. Cond: Good / Fair / Poor / Burnt

Steering: ~~Inorder / Jammed / Leaked / Burnt~~ or oful

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 205/60R16

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

Front		Rear	
R/Bal.	8 mm	R/Bal.	8 mm
L/Bal.	8 mm	L/Bal.	8 mm

D.O.A. 15/12/17 D.O.I. 20/12/17

Survey held at

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

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

Date / Time	Action / Instruction

Date/Time. File Pass to?

1)

Date/Time. File Return to?

2)

☐ : Preli. Report

☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee: ☐ : Site Insp ($) $ + PS $ SI

☐ : Interview ($) Photos

☐ : Tech. Invs ($) Others

☐ : Weekend ($)

TOTAL

Report Format :

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

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	1119F
Vehicle Details	
Vehicle No.:	SLE2746A
Vehicle to be Exported:	No
Intended De-registration Date:	20 Dec 2017
Vehicle Make:	MITSUBISHI
Vehicle Model:	LANCER EX 1.6 AT LED TAIL LAMP
Primary Colour:	Grey
Manufacturing Year:	2016
Engine No.:	4A92CJ5369
Chassis No.:	JMYSRCY1AGU005672
Maximum Power Output:	86.0 kW (115 bhp)
Open Market Value:	$14,316.00
Original Registration Date:	15 Jul 2016
First Registration Date:	15 Jul 2016
Transfer Count:	0
Actual PARF Paid:	$14,316.00
Computed PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	14 Jul 2026
PARF Rebate Amount:	$10,737.00
Computed COE Rebate Details	
COE Expiry Date:	14 Jul 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
COE:	$55,200.00
COE Rebate Amount:	$47,281.00
Total Rebate Amount:	**$58,018.00**

The information contained herein is correct as at 20 Dec 2017