

INS. CASE OWNER:

CC 4/DAI170 24435 1 Ups 3

IDAC:

ASSIGNMENT

Surveyor:

Marcus

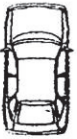
DOI:

27/12/17

Date / Time :

27/12/17

Pre-assign / CCU / FTE



Insured Vehicle No. :

SJY 5006B

Claim No. :

Name of Insured :

Policy No. :

Insured Tel No. :

HP:

Make / Model :

Excess Sec II :SS

D.O.A :

22/12/17

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. :

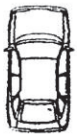
(V/L: YES / NO)

Insured Liability :

%

Final ? Yes / No

SLK 4316M



INSRS:

WSP: Pegasus

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time		STAGE	DATE / PIC
	SLK 4316M -X ; SJY 5006B -X	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\$		
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:	

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

Simmermercu

201/

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: 52K4316M

at Workshop m/s

of

Insured:

Policy No.

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:

IDAZ Accident Rpt: _____ Consistent? : Yes or No

GA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 2 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SLK4316M r Regn: 1 / 17

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

Truck / Trailer or CAI

Make: mercedes c.c. 1496

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

Sp. Reading: 56138 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: JM6SN22A8H0136315

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: 205/60R16

R:

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

TOYO / YOKO or

Front

Rear

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. 22/12/17 D.O.I. 27/12/17

Survey held at

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

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

Date / Time Action / Instruction

27/12/17 confirmed L/S & 2000 with willer.

Date/Time, File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee:

Transportation:

Add Fee: ☐ : Site Insp (\$) S + RS SI

☐ : Interview (\$) Photos

☐ : Tech. Invs (\$) Others

☐ : Weekend (\$)

Report Format :

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

TOTAL

Enquire Vehicle Registration Details**Owner Particulars**

NRIC/Passport/Company Cert No.: 201617200G
Owner ID Type: Company
Owner Name: GRAB RENTALS PTE LTD
Registered Address: 6 SHENTON WAY #38-01 OUE DOWNTOWN SINGAPORE 068809
Mailing Address: -
Birth Date: -

Vehicle Particulars

Vehicle No.: SLK4316M
Previous Vehicle No.: -
Effective Date of Ownership: 17 Jan 2017
Original Regn Date: 17 Jan 2017
Registration Date: 17 Jan 2017
Year of Manufacture: 2016
Vehicle Type: Private Hire (Chauffeur) Motor Car
Vehicle Scheme: -
Vehicle Attachment 1: With Sun Roof
Vehicle Attachment 2: -
Vehicle Attachment 3: -
Vehicle Make: MAZDA
Vehicle Model: MAZDA3 4-DOOR SEDAN 1.5L SP.6EAT
Primary Colour: Blue
Secondary Colour: -
Passenger Capacity: 4
Chassis No.: JM6BN22A8H0136315
Engine No.: P520421849
Engine Capacity/Power Rating: 1496 cc / -
Maximum Power Output: 88.0 kW (118 bhp)
Propellant: Petrol
Max Unladen Weight: 1310 kg
Maximum Laden Weight: 1835 kg
Open Market Value: \$14,777.00
PARF Eligibility: Yes
PARF Eligibility Expiry Date: 16 Jan 2027
Minimum PARF Benefit: \$4,888.00
No. of Transfers: 0
IU Label No.: 1127214772
COE No.: 2017010101000623W
COE Expiry Date: 16 Jan 2027
COE Category: A - Car up to 1600cc & 97kW (130bhp)
COE Registration Category: A - Car up to 1600cc & 97kW (130bhp)
Quota Premium (QP) / \$48,000.00 / -

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	7200G
Vehicle Details	
Vehicle No.:	SLK4316M
Vehicle to be Exported:	No
Intended De-registration Date:	27 Dec 2017
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA3 4-DOOR SEDAN 1.5L SP.6EAT
Primary Colour:	Blue
Manufacturing Year:	2016
Engine No.:	P520421849
Chassis No.:	JM6BN22A8H0136315
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$14,777.00
Original Registration Date:	17 Jan 2017
First Registration Date:	17 Jan 2017
Transfer Count:	0
Actual ARF Paid:	\$9,777.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	16 Jan 2027
PARF Rebate Amount:	\$7,332.00
Intended COE Rebate Details	
COE Expiry Date:	16 Jan 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)

COE Period(Years):	10
QP Paid:	\$48,000.00
COE Rebate Amount:	\$43,458.00
Total Rebate Amount:	\$50,790.00

The information contained herein is correct as at 27 Dec 2017

OK