.5/5/20	110	
INS.	CASE	OWNER

CC 6/DAI170 24436, Upa3
ASSIGNMENT

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Surveyor:	W	Alleron	0	DOI:	26/	NYX	Date / Time :	1/6	1	1		
					•		Registered in Merin	nen:				
Pre-assign / CCU	FTE C1	KW 59.	hm									
Insured Vehicle No	. :	400 31), .			Claim No.	:					
Name of Insured	:					Policy No.	;					
Insured Tel No.			HP:			Make / Model						
						Place of Accid						
Excess Sec II :SS						Place of Accid	cnt .					
Is driver the owner	YES	NO)	Nature of A	Accident :								
If NO, Driver Nan Driver Tel 1			(V/	L: YES / NO)	OI GIA REPO	RT: YES / NO ; TP ty: %	GIA REPORT Final? Yes		/NO		
8KM 9333	<u> </u>	-			1 7 7			→				
INSRS: WSP: Tel: Liability: RMKS:	M	INSRS: WSP: Tel: Liability RMKS:	·;			INSRS: WSP: Tel: Liability: RMKS:		INSRS: WSP: Tel: Liabilit RMKS:	y :)_
Date/ Time											_	
	Sma333	0 X;		KN/S AZ	100	X	STAGE	2	DAT	E / PI	C	
	340 (100	1	>	100017	101	/	Non-Reporting ltr (1: Non-Reporting ltr (2:					
							Non-Reporting ltr (F	inal):				
							Notification ltr (if no	n-pickup):				
							Call OI: After call ltr to OI:					
							Documentation Che	ok List: Han	dler	Typis	ı	_
							Notification ltr (if no		T T	Туріз		
							After call ltr to OI:	п-ріскир)				
							Authorisation To Act	4		i		
							Release Voucher:			İ		
							Final Repair Bill:					
							Car Rental Invoice:					
							Towing Invoice					
							LTA / GIA :					
							Medical Bill:					
							PIR:					
							Mandate/Reject Ins	truction:)
							LOD] [
							Payment Breakdow	n Form:		[
PRELIMINARY ADVICE	Date/Time:			Sent By:			Post-Repair Photos	:				
							Others:					
FINALIZATION	Date/Time:			Confirm with:			Confirm by:					
Repair Cost:	S\$	(Reduction:		%		Email	Call _			_
FINAL SETTLEMENT	Date/Time:	200	Confirm w				Email Call					_
Final Liability:	%	(Agreed /	Assessed)	BOLA S/N No	0. :		If NO or B 28, Ass	. Lia :				
Repair Cost:	S\$,	1\									
Loss of Rental (LOR):	S\$	(8	days)									_
Loss of Use (LOU): Loss of Income (LOI):	S\$ S\$	(\$ x	days)									
LOR only LOU only	LOR + LO		OR + LOI	[Tick o	only one]							
GIA/LTA Search	S\$		AC - LOI	[rick 0	my onej							
Medical:	S\$						1) Claim status: No	rmal/Reject/F	rivate	Settle		
Disbursement:	S\$			(e.g. Tow/ Ind	lependent)		2) Report Format:	3				
Legal Cost	S\$						3) Survey fee:					
Total:	SS		Global Su	ım S\$:								
FINAL PAYMENT	Date/Time:		Confirm v	vith:			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:									

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	5206C
Vehicle Details	
Vehicle No.:	SKU9333P
Vehicle to be Exported:	No
Intended De-registration Date:	26 Dec 2017
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA3 4-DOOR SEDAN 1.5L SP.6EAT
Primary Colour:	Black
Manufacturing Year:	2015
Engine No.:	P520285270
Chassis No.:	JM6BM42A8G0310818
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$16,696.00
Original Registration Date:	25 Jun 2015
First Registration Date:	25 Jun 2015
Transfer Count:	0
Actual ARF Paid:	\$6,696.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	24 Jun 2025
PARF Rebate Amount:	\$5,022.00
Intended COE Rebate Details	

COE Expiry Date:	24 Jun 2025
GOE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$61,000.00
COE Rebate Amount:	\$45,730.00
Total Rebate Amount:	\$50,752.00

The information contained herein is correct as at 26 Dec 2017

ОК