15/5/2010

INS. CASE OWNER: CC 3/ LCR18000232 / SWS3

LKK:

IDAC:

ASSIGNMENT

Surveyor: Sebastian DOI: 03/01/18 Date / Time : 03/01/18,

Registered in Merimen: 04/01/18

Pre-assign / CCU / FTE

Insured Vehicle No. : SLG 5264T Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 01/01/18 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**

SHC 4436P → → →

INSRS: WSP: SMRT Woodlands Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SHC 4436P - NS/ZNC1460178988/Kkm3k2 DOA: 1/1/18
	SLG 5264T - 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:		

ELIMINARY ADVICE Date/Time: Sent By:

NALIZATION	Date/Time:	Confirm with:	Confirm by: Email Call
air Cost:	S$	(days) Reduction: %	
AL SETTLEMENT	Date/Time:	Confirm with	Email Cal
al Liability:	%	(Agreed / Assessed) BOLA S/N No. :	If NO or B 28, Ass. Lia :
air Cost:	S$		
s of Rental (LOR):	S$	(days)	
s of Use (LOU):	S$	($ x days)	
n of Income (LOI):	S$	($ x days)	
R only LOU only	LOR + LOU	LOR + LO [Tick only one]	
A/LTA Search	S$		
dical:	S$		1) Claim status: Normal/Reject/Private Settle
bursement:	S$	(e.g. Tow/ Independent)	2) Report Format:
l Cost	S$		3) Survey fee:
al:	S$	**Global Sum S$:**	
NAL PAYMENT	Date/Time:	Confirm with:	Email Cal
ee 1:	S$	Name 1:	
ee 2: (Strike if N.A.)	S$	Name 2:	
ee 3: (Strike if N.A.)	S$	Name 3:	

REF:

Surname

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No:

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:

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 Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SHC 4436P Yr Regn: 13/1/2014

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

Truck / Trailer or

Make: Toyota Prius c.c 1798

Colour Maroon. A/C: Insured / Std / NI / NA

Sp.Reading 499344 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: JTDKN 3B4505722234

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: 195/65R15

R: "

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

TOYO / YOKO or Falken

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.	1/1/18	D.O.I.	3/1/18

Survey held at SMRT

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

Rear O/S

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

Date / Time / Action / Instruction

TAX / 01/18/2003

LKK

A1C

Date/Time, File Pass to? ☐ : Preli. Report ☐ : Final Report

1)

Date/Time, File Return to?

2)

Report Format :

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

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee: ☐ : Site Insp ($) S + RS. SI

☐ : Interview ($) Photos

☐ : Tech. Invs ($) Others

☐ : Weekend ($)

TOTAL

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Company
Owner ID:	5369K

Vehicle Details

Vehicle No.:	SHC4436P
Vehicle to be Exported:	No
Intended De-registration Date:	04 Jan 2018
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS TAXI (SMRT)
Primary Colour:	Maroon
Manufacturing Year:	2013
Engine No.:	2ZR6436380
Chassis No.:	JTDKN36U505722234
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	$33,120.00
Original Registration Date:	13 Jan 2014
First Registration Date:	13 Jan 2014
Transfer Count:	0
Actual ARF Paid:	$8,368.00

Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	12 Jan 2022

PARF Rebate Amount:	$6,276.00

Intended COE Rebate Details

COE Expiry Date:	12 Jan 2022
COE Category:	A - Car (1600cc & below)
COE Period(Years):	8
PQP Paid:	$60,888.00
COE Rebate Amount:	$30,607.00
Total Rebate Amount:	**$36,883.00**

Message

Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 04 Jan 2018

OK