

15/5/2010

INS. CASE OWNER:

CC 4 ASM AXA1800 0290, Unas

LKK:

IDAC:

SMA7
S7m0069L

Surveyor:

MARUS

DOI:

ASSIGNMENT

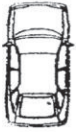
5/1/18

Date / Time:

4/1/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SGK 882E

Name of Insured:

Go Kok KIA7

Insured Tel No.:

HP:

96955866

Excess Sec II :S\$

D.O.A.:

28/12/17

Is driver the owner?

(YES / NO)

Nature of Accident:

Claim No.:

S7m0069L 1 22978

Policy No.:

GA231603

Make / Model:

Infiniti Q60

Place of Accident:

Ch Woodlands Customs

If NO, Driver Name / Age:

Driver Tel No.:

(V/L: YES / NO)

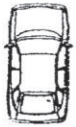
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? YES / No

SLJ 9481R



INSRS:

WSP:

Tel:

Liability:

RMKS:

Mui
Wang

INSRS:

WSP:

Tel:

Liability:

RMKS:



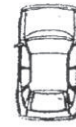
INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time	STAGE	DATE / PIC
SLJ 9481R - X ; SGK 882E - 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:	
	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\$	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: AXA

ASSIGNMENT

From: _____ Date: 05012018

Estimated Cost: _____

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

To Inspect Vehicle No: 9LJ 9481R

at Workshop m/s Hui Wang

of Bk 5 Defu Lane 10 #01-576

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.



Bal. or Market Value: _____

IDAC Accident Report: _____ Consistent? : Yes or No

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

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

Lump Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SLJ 8481R Yr Regn: 12 16

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

Truck / Trailer or CAI

Make: Honda shuttle co 1496

Colour: s. hu A/C: Insured / Std / NI / NA

So. Reading: 38372 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: GK 81006737

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: 185/60R15

R: _____

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

TOYO / YOKO or

Front

Rear

R/Bal. S mm R/Bal. S mmL/Bal. S mm L/Bal. S mm

D.O.A. 28/12/17 D.O.I. 5/1/18

Survey held at _____

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

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

Date / Time Action / Instruction

Date/Time: File Pass to?

☐ : Preli. Report☐ : Final Report

Date/Time: File Return to?

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee: ☐ Site Insp (\$)☐ Interview (\$)☐ Tech. Insp (\$)☐ Weekend (\$)

S - RS - SI

Photos

Others

Report Format: _____

Lump Sum / I.B.I: \$

TOTAL

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	1658C
Vehicle Details	
Vehicle No.:	SLJ9481R
Vehicle to be Exported:	No
Intended De-registration Date:	08 Jan 2018
Vehicle Make:	HONDA
Vehicle Model:	SHUTTLE 1.5G A
Primary Colour:	Grey
Manufacturing Year:	2016
Engine No.:	L15B3537909
Chassis No.:	GK81006737
Maximum Power Output:	97.0 kW (130 bhp)
Open Market Value:	\$18,016.00
Original Registration Date:	30 Dec 2016
First Registration Date:	30 Dec 2016
Transfer Count:	0
Actual ARF Paid:	\$8,016.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	29 Dec 2026
PARF Rebate Amount:	\$6,012.00
Intended COE Rebate Details	
COE Expiry Date:	29 Dec 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$49,751.00
COE Rebate Amount:	\$44,642.00
Total Rebate Amount:	\$50,654.00

The information contained herein is correct as at 05 Jan 2018

OK