15/5/2010

INS. CASE OWNER: CC6 / AIG18000999 / Aus3

LKK:

IDAC:

ASSIGNMENT

Surveyor: ADRIAN DOI: 15/01/18 Date / Time: 15/01/18

Registered in Merimen: 16/01/18

Pre-assign / CCU / FTE

Insured Vehicle No. : SBW 666J Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 13/01/18 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**

SLV 336Z → → →

INSRS:
WSP: SM Auto
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SLV 336Z - X ; SBW 666J - 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:	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 + LO ☐ [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:	

Surveyor | REF: |

ASSIGNMENT

24/12/08.

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. SLV 336Z Yr Regn. 2008 Dec

Type: (M.Car) / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or

Make: Nissan Latio. c.c 1498

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

Sp.Reading: 153515 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: JN1BAAC11Z0020501

Gen. Cond: (Good) / Fair / Poor / Burnt

Steering: (I/order) / Jammed / Leaked / Burnt or

Brake: (I/order) / Jammed / Leaked / Burnt or

Modi: Nil / (S/Rim) / STD A/Rim or

Tyre Size: F: 195/60R15

R: 195/60R15.

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

Front			Rear		
R/Bal.	06	mm	R/Bal.	06	mm
L/Bal.	06	mm	L/Bal.	06	mm
D.O.A.			D.O.I.	15/01/18	

Survey held at SM.

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

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

Date / Time	Action / Instruction
	TP A/G.
	MV: 16K
	PV: 8.7K
	Nett: 7.3K.

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

1) ☐ : Final Report

Date/Time. File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp (S$

☐ : Interview S$

☐ : Tech S$

☐ : Weekend S$

Survey Fee:

Transportation

) __S – RS__S

Photos

Others

TOTAL

Report Format:

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

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Business
Owner ID:	0662M

Vehicle Details

Vehicle No.:	SLV336Z
Vehicle to be Exported:	Yes
Intended De-registration Date:	13 Jan 2018
Vehicle Make:	NISSAN
Vehicle Model:	LATIO 1.5L AT ABS D/AIRBAG 2WD 4DR
Primary Colour:	Grey
Manufacturing Year:	2008
Engine No.:	HR15041216B
Chassis No.:	JN1BAAC11Z0020501
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	$16,017.00
Original Registration Date:	24 Dec 2008
First Registration Date:	24 Dec 2008
Transfer Count:	4
Actual ARF Paid:	$16,017.00

Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	23 Dec 2018
PARF Rebate Amount:	$8,008.00

Intended COE Rebate Details

COE Expiry Date:	23 Dec 2018
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
QP Paid:	$7,721.00
COE Rebate Amount:	$728.00
Total Rebate Amount:	**$8,736.00**

The information contained herein is correct as at 13 Jan 2018

OK