15/5/2010

INS. CASE OWNER: CC4 / EQ11800 1027 / Kka3

LKK:

IDAC:

ASSIGNMENT

Surveyor: Kenneth DOI: 17-01-18 Date / Time : 17-01-18

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : GBD 991 U Claim No. : Gx

Name of Insured : MINOX VALVES & FITTINGS P/L Policy No. : DMCPHQ17-007674

Insured Tel No. : HP: Make / Model : NISSAN CABSTAR

Excess Sec II :S$ D.O.A : 15/01/18 Place of Accident : 10 KAKI BUKIT ROAD 2 > WOODLANDS

Is driver the owner? (YES / NO) Nature of Accident :

If **NO**, Driver Name / Age : SAHARUDIN BIN ISMAIL OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : 97978308 (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SDJ 901 A → → →

INSRS: CHINA WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SDJ 901 A - CC6/AIG 13013350/Kg212W2 ; DOA: 19/1/13
	GBD 991 U - 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 + 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: EQI

ASSIGNMENT

09 10

From: Date: 17/01/2018

Estimated Cost:

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

To inspect Vehicle No: SDJ 901A

at Workshop m/s: Lai Huat (Meng Kee)

of: 160 Sin Ming Drive #04-01 / 04-02

Insured:

Policy No:

Claims No:

Sum Insured: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

N/S O/S

Remark: The veh had commenced its repair at the time of inspection.

Bal. or Market Value:

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 11 days Res.: Yes or No

Lum Sum: 1.B/ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS wp?

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SDJ 901A Regn:

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

Make: Lexus (A) IS250 cc 2500

Colour: M. Black A.C: Insured / Std / NI / NA

Sp Reading: 111,945 T.Radio: Insured / Std / NI / NA

Eng No:

C/No: JTHBK262502100394

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

Steering: (Inorder) / Jammed / Leaked / Burnt or

Brake: (Inorder) / Jammed / Leaked / Burnt or

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

Tyre Size: F: — —

R: 245/45R17

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

Front			Rear		
R.Bal.	8	mm	R.Bal.	7	mm
L.Bal.	8	mm	L.Bal.	7	mm
D.O.A.	15/1/18		D.O.I.	17/1/18	

Survey held at: ✓

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

O/S body

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

Date / Time Action / Instruction

18/1 File pass to Catherine

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 $

☐ Technical $

☐ Weekend $

Report Format:

Lump Sum / I.B / 3

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Singapore NRIC
Owner ID:	4715G

Vehicle Details

Vehicle No.:	SDJ901A
Vehicle to be Exported:	Yes
Intended De-registration Date:	15 Jan 2018
Vehicle Make:	TOYOTA
Vehicle Model:	LEXUS IS250 AUTO STD
Primary Colour:	Purple
Manufacturing Year:	2010
Engine No.:	4GR0693622
Chassis No.:	JTHBK262502100394
Maximum Power Output:	153.0 kW (205 bhp)
Open Market Value:	$38,845.00
Original Registration Date:	30 Sep 2010
First Registration Date:	30 Sep 2010
Transfer Count:	0
Actual ARF Paid:	$38,845.00

Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	29 Sep 2020
PARF Rebate Amount:	$23,307.00

Intended COE Rebate Details

COE Expiry Date:	29 Sep 2020
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
QP Paid:	$43,334.00
COE Rebate Amount:	$11,724.00
Total Rebate Amount:	**$35,031.00**

The information contained herein is correct as at 15 Jan 2018