

INS. CASE OWNER:

CC 4 / AIG1800 1580 , T1ua3

LKK:

IDAC:

Surveyor:

Tanfer

DOI:

ASSIGNMENT

29/01/18

Date / Time:

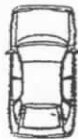
28/01/18

Registered in Merimen:

28/01/18

Pre-assign / CCU / FTE

SGX 4884E



Insured Vehicle No. :

Claim No. :

Name of Insured :

TAN KHIM CHUAN

Policy No. :

Insured Tel No. :

HP:

9686 2705

Make / Model :

Excess Sec II : S\$

D.O.A.:

29/01/18

Place of Accident :

Jourong East Ave 1 Hawker Centre

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

Driver Tel No. :

(V/L: YES / NO)

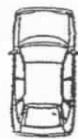
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability :

%

Final ? Yes / No

86Q 7173R



INSRS:

WSP:

Tel :

Liability :

RMKS:

TAN KHIM CHUAN



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

86Q 7173R - X ; SGX 4884E - X
20/1/18 OMR. to send first letter.

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\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

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: ALG

Surveyor

ASSIGNMENT

From: _____ Date: 29/01/2018

Estimated Cost: _____

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

To Inspect Vehicle No: SGQ 7173R

at Workshop m/s Toh Ah Swee
of Blk 2 Kranji Loop #01-02

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.4pm
owner waiting

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ 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

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SGQ 7173R

Yr Regn: 12/1/2017

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

Truck / Trailer or

Make: Toyota Harrier C.C. 1986

Colour: White A/C: Insured / Std / NI / NA

Sp. Reading: 26282 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: ZSU 600074931

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: 255/45R20

R: 11

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

TOYO / YOKO or

Front

R/Bal. 7 mm

L/Bal. 7 mm

D.O.A. 24/1/18

Survey held at

Toh Ah Swee

Rear

R/Bal. 7 mm

L/Bal. 7 mm

D.O.I. 29/1/18

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

Frt N/S

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

Date / Time Action / Instruction

Date/Time. File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time. File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

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

) \$ - RS \$

) Photos

) Others

TOTAL

Report Format : _____

Lump Sum / I.B.I. (\$) _____

Enquire Transfer Fee

Vehicle Details		
Vehicle No. :	SGQ7173R	
Vehicle Type :	P11 - Passenger Station Wagon/Jeep/Land Rover	
Vehicle Attachment 1 :	No Attachment	
Vehicle Scheme :	Normal	
Vehicle Make :	TOYOTA	
Vehicle Model :	HARRIER 2.0 PREMIUM AT AIRBAG 2WD 5DR	
Chassis No. :	ZSU600074931	
Propellant :	Petrol	
Engine No. :	3ZRB755452	
Engine Capacity :	1986 cc	
Maximum Power Output :	111.0 kW (148 bhp)	
Maximum Laden Weight :	1885 kg	
Unladen Weight :	1610 kg	
Year Of Manufacture :	2016	
Original Registration Date :	12 Jan 2017	
Lifespan Expiry Date :	-	
COE Category :	B - Car above 1600cc or 97kW (130bhp)	
Quota Premium :	\$53,001.00	
COE Expiry Date :	11 Jan 2027	
Road Tax Expiry Date :	11 Jan 2019	
PARF Eligibility Expiry Date :	11 Jan 2027	
Inspection Due Date :	11 Jan 2020	