		1		LKK:		
15/5/2010		and Company	0-111			
INS. CASE OWNER:		CC 6 / CTI180 01	826 10	(ess IDAC.		
		ASSIGNM	MENT			
	MARCUS	DOI: 30/0	1/18	Date / Time : 30/0	1/18	
Surveyor:	MARCOS			Registered in Merimen:		
Pre-assign / CCU /	म्हान्द्र -					
rre-assign/ CCC/		72				
Insured Vehicle No.	SJN 90	101A	Claim No.	:		
Nome of Insured				Policy No. :		
Name of histored	Name of Insured :			00000 0000 0000 00000		
Insured Tel No.	:	HP:	Make / Model			
Excess Sec II :S\$		D.O.A: 27/01/18	Place of Acciden	nt:		
Is driver the owner	(YES / NO)	Nature of Accident :				
100 CO	A 10		OI GIA REPOR	T: YES / NO ; TP GIA REPORT:	YES / NO	
If NO, Driver Nam		(V/L: YES / NO)	Insured Liability	1000		
Driver Tel I	No. :	(V/L. 1E3/ NO)	Insured Entering		102	
GBD 754	4G					
			TATOTA C.	INSRS:		
INSRS: WSP: LSA AA	INSR: WSP:	S:	INSRS: WSP:	WSP:		
Tel:	Tel:	1-1	Tel:	Tel:		
Liability:	Liabil	ity:	Liability:	Liability	;	
RMKS:	RMK	s:	RMKS:	RMKS:		
Date/ Time						
Date/Time	GBO 75446 -X			STAGE	DATE/PIC	
	CT. 9/401A - C	S/AJG1000 4225/ Rpn	00/12/19	Non-Reporting ltr (1st):		
	3/1/ 19011)	3/12/4/30/12/3/	20	Non-Reporting ltr (2nd):		
* * * *				Non-Reporting ltr (Final):		
				Notification ltr (if non-pickup):		
	- 100 m			Call OI: After call ltr to OI:	2_222	
			<u> </u>	Documentation Check List: Handle	er Typist	
	<u> </u>			Notification ltr (if non-pickup)	I Typist	
200 to 10 to 10				After call ltr to OI:		
				Authorisation To Act:		
				Release Voucher:		
				Final Repair Bill:		
				and the second s		
				Car Rental Invoice:		
				Towing Invoice	=	
				LTA/GIA:		
				Medical Bill:		
<u> </u>	ļ. <u> </u>			PIR:	 	
				Mandate/Reject Instruction:		
920 00				LOD Payment Breakdown Form:		
	Data (Firms)	Sant Du		Post-Repair Photos:		
PRELIMINARY ADVICE	Date/Time:	Sent By:		Others:		
DENIA E EZ A ZEGORI	Data/Time:	Confirm with:		Confirm by:	<u> </u>	
FINALIZATION	Date/Time:	days) Reduction:	%		'ali	
Repair Cost: FINAL SETTLEMENT	Date/Time:	Confirm with		Email Cal		
Final Liability:		/ Assessed) BOLA S/N No. :		If NO or B 28, Ass. Lia:		
Repair Cost:	S\$, amountary around britished	<u>;; </u>	802 5	10 to	
Loss of Rental (LOR):	S\$ (days)				
Loss of Use (LOU):		x days)	*			

S\$

S\$

SS

S\$

S\$

S\$

S\$

S\$ S\$

Date/Time:

LOR + LOU

Loss of Use (LOU): Loss of Income (LOI):

LOR only LOU only

GIA/LTA Search

Disbursement:

FINAL PAYMENT

Payee 2: (Strike if N.A.)

Payee 3: (Strike if N.A.)

Medical:

Legal Cost

Total:

Payee 1:

days) LOR + LO

Global Sum S\$:

Confirm with:

Name 1:

Name 2:

Name 3:

[Tick only one]

(e.g. Tow/ Independent)

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

Email Cal

3) Survey fee:

6111

ASSI	<u>GNMENT</u>
From: Date:	Veh No: 6BDZFYQGYr Regn: 418
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van/ Lorry / Taxi / Prime Mover /
OD (TP) WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or (M)
To Inspect Vehicle No: GBD75466	Make: - Toyola Dyne cc 2987
at Workshop m/s	Colour S. Ne A/C: Insured / Std / NI / NA
of	Sp.Reading / 30 783 T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	C/NO: KD1/23/ 40/2040
Claims No.	Gen. Cond Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inferder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil JS/Rim / STD A/Rim or
	Tyre Size: F: 195 N (5
(Policy Condition)	R: /65 n13
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO /YOKO & CONDO
Bal. or Market Value:	<u>Front</u> Rear
IDAC accident Rport: Consistent? : Yes or No	R/Bail. 6 mm R/Bail. 6 6 mm
Giff / PR Seen: Consistent?: Yes or No	L/Bal. 6 mm L/Bal. 6/6 mm
Est. Repairs: 6 days Res.: Yes or No	D.O.A. 27/1/18 D.O.I. 30/1/12
Lum Sum: 20 % 3 Val.: Yes or No	Survey held at
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT	
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction 11/4 / 73 %	
1/1/18 confully & 5500 W.	
ililis contradys & SSUO WI	to theren.
Date/Time, File Pass to? " : Preli. Report D	Taye Of Panalis
	ays Of Repair:
Date/Time, File Return to?	esurvey No. of Trip: Survey Fee:
Add Fee:	Transportation:
	: Interview (\$) Photos
Report Format :	: Tech. Invs (\$) Others
Lump Sum / I.B.I: (\$: Weekend (\$
j	AAAAAAIIO (A.)

TOTAL

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars Company Owner ID Type: 4929K Owner ID: Vehicle Details GBD7544G Vehicle No.: Yes Vehicle to be Exported: 29 Jan 2018 Intended De-registration Date: **TOYOTA** Vehicle Make: DYNA 3.0 M Vehicle Model: Silver Primary Colour: 2014 Manufacturing Year: 1KD2465495 Engine No.: KDY2318018040 Chassis No.: Maximum Power Output: \$28,276.00 Open Market Value: 24 Apr 2015 Original Registration Date: 24 Apr 2015 First Registration Date: 2 **Transfer Count:** \$1,414.00 Actual ARF Paid: Intended PARF Rebate Details No PARF Eligibility: PARF Eligibility Expiry Date: \$0.00 PARF Rebate Amount: Intended COE Rebate Details 23 Apr 2025 COE Expiry Date: C - Goods Vehicle & Bus COE Category: 10 COE Period(Years): \$23,996.00 PQP Paid:

The information contained herein is correct as at 29 Jan 2018

COE Rebate Amount:

Total Rebate Amount:

ОК

\$17,363.00

\$17,363.00

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	4929K
Vehicle Details	
Vehicle No.:	GBD7544G
Vehicle to be Exported:	No
Intended De-registration Date:	30 Jan 2018
Vehicle Make:	TOYOTA
Vehicle Model:	DYNA 3.0 M
Primary Colour:	Silver
Manufacturing Year:	2014
Engine No.:	1KD2465495
Chassis No.:	KDY2318018040
Maximum Power Output:	
Open Market Value:	\$28,276.00
Original Registration Date:	24 Apr 2015
First Registration Date:	24 Apr 2015
Transfer Count:	2
Actual ARF Paid:	\$1,414.00
Intended PARF Rebate Deta	ils
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Detail	
COE Expiry Date:	23 Apr 2025
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$23,996.00
COE Rebate Amount:	\$17,356.00
Total Rebate Amount:	\$17,356.00
The information contained herein	is correct as at 30 Jan 2018

The information contained herein is correct as at 30 Jan 2018 $\,$