15/5/2010

INS. CASE OWNER: CC 4 / LCR1 8003395 / Kja3

LKK:

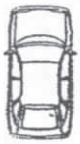
IDAC:

ASSIGNMENT

Surveyor: Kenneth DOI: 26/2/18 Date / Time : 27/02/18

Registered in Merimen: 27/02/18

Pre-assign / CCU / FTE



Insured Vehicle No. : SLK 6395 X

Name of Insured : Lee pic

Insured Tel No. : HP:

Excess Sec II :S$ D.O.A : 17/2/18

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

If **NO**, Driver Name / Age : Ong Kok Meng

Driver Tel No. : (V/L: YES / NO)

Claim No. : 6x

Policy No. :

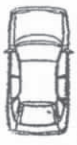
Make / Model : T. Altis

Place of Accident : Loyang Ave

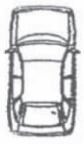
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : % **Final ? Yes / No**

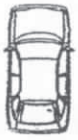
GBD 681P → → →



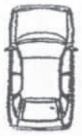
INSRS:
WSP: Mary's united
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	GBD 681P - X ; SLK 6395 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:	

ASS. REC. BY: Kenneth | REF: AG1

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Alan'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: 04 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: GBD 681P Yr Regn: 05, 14

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

Make: NISSAN NV200 c.c 1461

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

Sp.Reading 76681 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: VSKYBAM20U0072360

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modi : Nil / S/Rim / STD A/Rim or _____

Tyre Size: F: B.S 175 70R14

R: Falken

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	8 mm
L/Bal.	6 mm	L/Bal.	8 mm
D.O.A.	17/2/18	D.O.I.	26/2/18

Survey held at _____ ✓

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

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

Date / Time	Action / Instruction
27/2	Re pass to Carmen

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2)

☐ : Prell. Report

☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ : Tech. Invs ($ _____)

☐ : Weekend ($ _____)

Report Format : _____

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

Survey Fee: _____

Transportation: _____

___$ + RS___SI

Photos _____

Others _____

TOTAL _____

Annex A

Transaction ref 20140522141235884748

The owner and vehicle particulars for Vehicle No. GBD681P as at 22 May 2014 are as follows:

1.	Name	: KENTUCKY FRIED CHICKEN MGT P L
2.	Identification No. Type	: Company
3.	Identification No.	: 198600837K
4.	Place Of Passport Issue	: -
5.	Registered Address	: 17 KALLANG JUNCTION #02-01 SINGAPORE 339274
6.	Mailing Address	: -
7.	Vehicle No.	: GBD681P
8.	Effective Date of Ownership	: 22 May 2014
9.	Original Registration Date	: 22 May 2014
10.	First Registration Date	: 22 May 2014
11.	Vehicle Type	: A50 - Goods (Closed) Van/Van Panel (Delivery)
12.	Vehicle Scheme	: Normal
13.	Attachment 1	: No Attachment
14.	Attachment 2	: -
15.	Attachment 3	: -
16.	Vehicle Make	: NISSAN
17.	Vehicle Model	: NV200 1.5L MT ABS AIRBAG 2WD 6DR EURO 5
18.	Year of Manufacture	: 2013
19.	Primary Colour	: White
20.	Secondary Colour	:
21.	Passenger Capacity	: 1
22.	Chassis/Trailer Chassis No.	: VSKYBAM20U0072360 / -
23.	Propellant	: Diesel
24.	Engine No./Motor No.	: K9KF276D053219 / -
25.	Engine Capacity(cc)/Power Rating(kW)	: 1461 / -
26.	Maximum Power Output(kW/bhp)	: - / -
27.	Unladen Weight(kg)	: 1300
28.	Maximum Laden Weight(kg)	: 2030
29.	Open Market Value	: $19,232.00
30.	PARF Eligibility	: No
31.	PARF Eligibility Expiry Date	: -
32.	Minimum PARF Benefit	: $0.00
33.	IU Label No.	: -
34.	COE No.	: 2014050105000361G
35.	COE Expiry Date	: 21 May 2024
36.	COE Category	: C - Goods Vehicle & Bus
37.	Quota Premium/Prevailing Quota Premium	: $32,890.00
38.	Actual Quota Premium/PQP Paid	: $32,890.00
39.	Actual ARF Paid	: $962.00
40.	CO2 Emission(g/km)	: 138.00
41.	Actual CEVS Rebate Utilised	: -
42.	CEVS Surcharge Paid	: -
43.	Actual Green Vehicle Rebate Utilised	: -
44.	Vehicle Lifespan Expiry Date	: 21 May 2034
45.	Road Tax Amount	: $200.00
46.	Road Tax Start Date	: 22 May 2014
47.	Road Tax End Date	: 21 Nov 2014
48.	Remarks	: This vehicle requires side marking. To renew the COE, the Prevailing Quota Premium payable is that of Category C.