

15/02/10

INS. CASE OWNER:

CC 4/III18003430 / SW53

LKK:

IDAC:

ASSIGNMENT

Surveyor:

Sebastian

DOI:

21/02/12

Date / Time :

21/02/12

Registered in Merimen:

22/02/12

Pre-assign / CCU / FTE



Insured Vehicle No. : SHC 832J

Claim No. :

Name of Insured :

Policy No. :

Insured Tel No. :

HP:

Make / Model :

Excess Sec II : S\$

D.O.A. : 12/02/12

Place of Accident :

Is driver the owner?

(YES / NO)

Nature of Accident :

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

If NO, Driver Name / Age :

Driver Tel No. :

(V/L: YES / NO)

Insured Liability :

%

Final ? Yes / No

SHD 6355X



INSRS:

WSP: SMRT (Woodlands)

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time	STAGE	DATE / PIC
SHD 6355X - NO KNC1407110/Klghd1	Non-Reporting ltr (1st):	Don: 07/11/14
SHC 832J - CC2/125650185/81091	Non-Reporting ltr (2nd):	Don: 18/08/09
- CC4/1719000340/K53	Non-Reporting ltr (Final):	Don: 22/03/17
- CC4/1719000340/K53	Notification ltr (if non-pickup):	Don: 04/01/13
- CD3/176070185/81091	Call OI:	Don: 18/03/09
- CS/1550902692/Klgh1	After call ltr to OI:	Don: 25/11/09
	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:

Email ☐ Call ☐

Repair Cost:

S\$

(days) Reduction: %

Email ☐ Call ☐

FINAL SETTLEMENT

Date/Time:

Confirm with:

If NO or B 28, Ass. Lia :

Final Liability:

%

(Agreed / Assessed) BOLA S/N No. :

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\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

Total:

S\$

Global Sum S\$:

Email ☐ Call ☐

FINAL PAYMENT

Date/Time:

Confirm with:

Payee 1:

S\$

Name 1:

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3:

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Company

Owner ID:

5369K

Vehicle Details

Vehicle No.:

SHD6355X

Vehicle to be Exported:

No

Intended De-registration Date:

22 Feb 2018

Vehicle Make:

TOYOTA

Vehicle Model:

PRIUS HYBRID 1.8 CVT

Primary Colour:

Maroon

Manufacturing Year:

2017

Engine No.:

2ZR8261366

Chassis No.:

JTDKB3FU303576730

Maximum Power Output:

90.0 kW (120 bhp)

Open Market Value:

\$29,007.00

Original Registration Date:

14 Dec 2017

First Registration Date:

14 Dec 2017

Transfer Count:

0

Actual ARF Paid:

\$5,000.00

Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

13 Dec 2025

PARF Rebate Amount:	\$3,750.00
Intended COE Rebate Details	
COE Expiry Date:	13 Dec 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$34,159.00
COE Rebate Amount:	\$33,335.00
Total Rebate Amount:	\$37,085.00

Message

Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 22 Feb 2018

OK