15/5/2010

INS. CASE OWNER: CC 4, III 1800 4898, R1e a3

LKK:

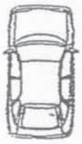
IDAC:

ASSIGNMENT

Surveyor: RASUL DOI: 15/3/18 Date / Time : 14/3/18

Registered in Merimen: 14/3/18

Pre-assign / CCU / FTE SHO 3131 U



Insured Vehicle No. : Claim No. :

Name of Insured : Policy No. : 4x

Insured Tel No. : HP: Make / Model :

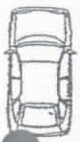
Excess Sec II :S$ D.O.A : 11/3/18 Place of Accident :

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

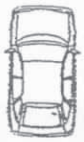
If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

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

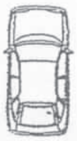
SJF 34737 → ______ → ______ → ______



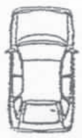
INSRS:
WSP: Rasy link
Tel :
Liability :
RMKS: ?



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SJF 34737 - x ;
	SHO3131U - C13 / D1G16015503 / 141-2b3q7 ; DOA: 16/8/16

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:	

Surveyor Rajan | REF: | 71958

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SJF 3473Z

at Workshop m/s EASY LINK AUTO

of 50, BUKIT BATOK ST 23 #01-07

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition) Enol 9236896

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

N/S	O/S

Bal. or Market Value: 5K

IDAC Accident Rport: _____ 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: SJF 3473Z Yr Regn: 2008 / MAY

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

Make: CHERY A5 1.6 MT c.c 1597

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

Sp.Reading 135382 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: LVVDC11B28D058720

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: 195/55R15

R: " "

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

Front		Rear	
R/Bal.	5 mm	R/Bal.	5 mm
L/Bal.	5 mm	L/Bal.	5 mm
D.O.A.	11/03/18	D.O.I.	15/03/18

Survey held at EASY LINK

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

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

Date / Time	Action / Instruction
	finalised amt at $650 / 3 days A/P confirm

Date/Time, File Pass to? 1) _____

☐ : Preli. Report

☐ : Final Report

Date/Time, File Return to? 2) _____

Report Format : _____

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

Days Of Repair: _____

Resurvey No. of Trip: _____

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

Survey Fee: _____

Transportation: _____ S + RS ___ SI

Photos _____

Others _____

TOTAL _____

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	7195B
Vehicle Details	
Vehicle No.:	SJF3473Z
Vehicle to be Exported:	No
Intended De-registration Date:	16 Mar 2018
Vehicle Make:	CHERY
Vehicle Model:	A5 1.6 MT ABS D/AIRBAG 2WD 4DR
Primary Colour:	Silver
Manufacturing Year:	2008
Engine No.:	SQR481FAF8B01675
Chassis No.:	LVVDC11B28D058720
Maximum Power Output:	87.5 kW (117 bhp)
Open Market Value:	$7,798.00
Original Registration Date:	27 May 2008
First Registration Date:	27 May 2008
Transfer Count:	2
Actual ARF Paid:	$6,499.00
OPC Cash Rebate Details	
OPC Cash Rebate Eligibility:	No
OPC Cash Rebate Eligibility Expiry Date:	-
OPC Cash Rebate Amount:	-
Intended PARF Rebate Details	

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	26 May 2018
PARF Rebate Amount:	$3,249.00
Intended COE Rebate Details	
COE Expiry Date:	26 May 2018
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
QP Paid:	$0.00
COE Rebate Amount:	$0.00
Total Rebate Amount:	**$3,249.00**

The information contained herein is correct as at 16 Mar 2018

OK

5000
3249
1751