

INS. CASE OWNER:

CC 4 / III 1800 6139, Gha3

LKK:

IDAC:

Surveyor:

Xha

DOI:

ASSIGNMENT

31/4/18

Date / Time :

24/4/18

Registered in Merimen:

31/4/18

Pre-assign / CCU / FTE



Insured Vehicle No. : SH 84845

Name of Insured :

Insured Tel No. : HP: 41/1/8

Excess Sec II :SS D.O.A : 41/1/8

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

PBL 3163 G



INSRS:

WSP: Unique

Tel:

Liability: motosparks

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

PBL 3163 G - X

SH 84845 - M (IN 70 23 24 41 KIR BUN 2; 06/5/11/12)

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\$

Legal Cost

S\$

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:

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

Signature

xml.

REF:

II

79104

ASSIGNMENT

From:

Date:

3/1/18

Estimated Cost:

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

To Inspect Vehicle No:

FBL 3163G

at Workshop m/s

Unique Motorsports

of

11 Tannery Lane

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

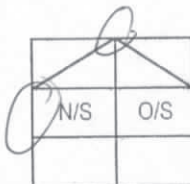
(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its

repair at the time of inspection.



Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

2 days

Res.: Yes or No

Lum Sum:

20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

'up'

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

FBL 3163G

Yr Regn:

19 Aug 2016

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

Truck / Trailer or

Make:

Bajaj Pulsar

C.C.

200

Colour

white

A/C:

Insured / Std / NI / NA

Sp.Reading

-

T/Radio: Insured / Std / NI / NA

Eng/No:

MP2A36F87GCA25827

C/No:

Gen. Cond: ☒ Good / Fair / Poor / BurntSteering: ☒ In order / Jammed / Leaked / Burnt orBrake: ☒ In order / Jammed / Leaked / Burnt orModi: ☒ Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

100/80-17

R:

130/70-17

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

TOYO / YOKO or

EURO GRIP

Front

Rear

R/Bal.

S

mm

R/Bal.

S

mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

D.O.I.

03-04-18

Survey held at

w/s

4:30pm

Des. of Damages: ☒ Frt / ☒ Rear / ☒ O/S / ☒ N/S / ☒ UIC / Rooftop or

and

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

03/4 Finalized \$ 1100 with Alvin.

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

) \$ + RS. \$

) Photos

) Others

TOTAL

Report Format :

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

Add Fee:

☐

: Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	7910H
Vehicle Details	
Vehicle No.:	FBL3163G
Vehicle to be Exported:	No
Intended De-registration Date:	04 Apr 2018
Vehicle Make:	BAJAJ
Vehicle Model:	PULSAR 200 NS FI
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	JLZCGA29257
Chassis No.:	MD2A36FZ7GCA25827
Maximum Power Output:	-
Open Market Value:	\$2,192.00
Original Registration Date:	19 Aug 2016
First Registration Date:	19 Aug 2016
Transfer Count:	0
Actual ARF Paid:	\$329.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	18 Aug 2026
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$6,302.00
COE Rebate Amount:	\$5,275.00
Total Rebate Amount:	\$5,275.00

The information contained herein is correct as at 04 Apr 2018

OK