

INS. CASE OWNER:

CL | CC 4/ASM1800 6787, Kha3 | LKK: 39505
IDAC: 39505

ASSIGNMENT

Surveyor: Kemlinh.

DOI: 12/4/18

Date / Time: 11-4-18

Registered in Merimen: _____

Pre-assign / CCU / FTE



Insured Vehicle No. : SLA 3586J
 Name of Insured : _____
 Insured Tel No. : _____ HP: _____
 Excess Sec II :SS _____ D.O.A: 9-4-18
 Is driver the owner? (YES / NO) Nature of Accident : _____

Claim No. : 88m0001J.
 Policy No. : _____
 Make / Model : _____
 Place 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

SK68702M →



INSRS: _____
 WSP: City Auto
 Tel : _____
 Liability : _____
 RMKS: _____



INSRS: _____
 WSP: _____
 Tel : _____
 Liability : _____
 RMKS: _____



INSRS: _____
 WSP: _____
 Tel : _____
 Liability : _____
 RMKS: _____



INSRS: _____
 WSP: _____
 Tel : _____
 Liability : _____
 RMKS: _____

Date/ Time	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)	<input type="checkbox"/> <input type="checkbox"/>
	After call ltr to OI:	<input type="checkbox"/> <input type="checkbox"/>
	Authorisation To Act:	<input type="checkbox"/> <input type="checkbox"/>
	Release Voucher:	<input type="checkbox"/> <input type="checkbox"/>
	Final Repair Bill:	<input type="checkbox"/> <input type="checkbox"/>
	Car Rental Invoice:	<input type="checkbox"/> <input type="checkbox"/>
	Towing Invoice	<input type="checkbox"/> <input type="checkbox"/>
	LTA / GIA :	<input type="checkbox"/> <input type="checkbox"/>
	Medical Bill:	<input type="checkbox"/> <input type="checkbox"/>
	PIR:	<input type="checkbox"/> <input type="checkbox"/>
	Mandate/Reject Instruction:	<input type="checkbox"/> <input type="checkbox"/>
	LOD	<input type="checkbox"/> <input type="checkbox"/>
	Payment Breakdown Form:	<input type="checkbox"/> <input type="checkbox"/>
	Post-Repair Photos:	<input type="checkbox"/> <input type="checkbox"/>
	Others:	<input type="checkbox"/> <input type="checkbox"/>
PRELIMINARY ADVICE Date/Time: _____ Sent By: _____		
FINALIZATION Date/Time: _____ Confirm with: _____ Confirm by: _____		
Repair Cost: S\$ _____ (_____ days) Reduction: _____ % Email <input type="checkbox"/> Call <input type="checkbox"/>		
FINAL SETTLEMENT Date/Time: _____ Confirm with: _____ Email <input type="checkbox"/> Call <input type="checkbox"/>		
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 <input type="checkbox"/> LOU only <input type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/> [Tick only one]		
GIA/LTA Search S\$ _____		
Medical: S\$ _____		
Disbursement: S\$ _____ (e.g. Tow/ Independent)		1) Claim status: Normal/Reject/Private Settle
Legal Cost S\$ _____		2) Report Format: _____
		3) Survey fee: _____
Total: S\$ _____ Global Sum S\$: _____		
FINAL PAYMENT Date/Time: _____ Confirm with: _____ Email <input type="checkbox"/> Call <input type="checkbox"/>		
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:	1535G
Vehicle Details	
Vehicle No.:	SKG8702M
Vehicle to be Exported:	Yes
Intended De-registration Date:	13 Apr 2018
Vehicle Make:	NISSAN
Vehicle Model:	SYLPHY 1.5L 4AT ABS D/AB 2WD 4DR
Primary Colour:	Blue
Manufacturing Year:	2012
Engine No.:	HR15020322D
Chassis No.:	JN1BAAG11Z0151287
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$14,929.00
Original Registration Date:	16 Oct 2012
First Registration Date:	16 Oct 2012
Transfer Count:	1
Actual ARF Paid:	\$14,929.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	15 Oct 2022
PARF Rebate Amount:	\$10,450.00
Intended COE Rebate Details	
COE Expiry Date:	15 Oct 2022
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
QP Paid:	\$69,000.00
COE Rebate Amount:	\$31,087.00
Total Rebate Amount:	\$41,537.00

The information contained herein is correct as at 13 Apr 2018

OK