

INS. CASE OWNER:

Wingie

CC 4, Asm 1800 7145

SWA3

LKK:

IDAC:

40319

Surveyor:

ywk

DOI:

ASSIGNMENT

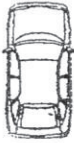
12/04/18

Date / Time :

17/04/2018

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

SBA 3897 E

Claim No. :

Name of Insured :

Neo Chin Seng

Policy No. :

Insured Tel No. :

HP:

Make / Model :

BMW 530

Excess Sec II :SS

D.O.A.:

11.04.18

Place of Accident :

WATERLOO ROAD EXT.

Is driver the owner?

(YES / ☒)

Nature of Accident :

If NO, Driver Name / Age :

PHUA ANG GEE

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

Driver Tel No. :

94501249

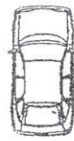
(V/L: YES / NO)

Insured Liability :

%

Final ? Yes / No

SMB 1343P



INSRS:

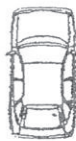
WSP:

Tel :

Liability :

RMKS:

SMB 1



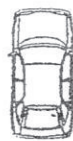
INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time		STAGE	DATE / PIC
	SMB 1343P - X;	Non-Reporting ltr (1st):	
	SBA 3897 E - C3 / AG 150 B 207 / Rvbd1; PVA: 04/8/15	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:	☐ ☐
PRELIMINARY ADVICE	Date/Time:	Sent By:	Post-Repair Photos: ☐ ☐
			Others: ☐ ☐
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\$	(e.g. Tow/ Independent)	1) Claim status: Normal/Reject/Private Settle
Legal Cost	S\$		2) Report Format:
Total:	S\$	Global Sum S\$:	3) Survey fee:
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:	

REF:

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/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.

Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

days

Res.: Yes or No

Lump Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐ : Preli. Report
☐ : Final Report

Date/Time, File Return to?

2)

Report Format :

Lump Sum / I.B.F. (\$

Veh No.

SMG 1343P

Yr Regn:

8/4/2013

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

Truck / Trailer or

Make:

Man NL320F

Colour

Multi Colour

Sp. Reading

4788/3

Eng/No:

C/No:

WM AA 22 Z 20700/775

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:

175/70R225

R:

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

TOYO / YOKO or

Goodyear

Front

R/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

11/4/13

Survey held at

SMAT

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

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

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

☐ : Site Insp (\$
☐ : Interview (\$
☐ : Tech. Invs (\$
☐ : Weekend (\$

Survey Fee:

Transportation.

) \$ + RS. \$

Photos

Others

TOTAL

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	2292D
Vehicle Details	
Vehicle No.:	SMB1343P
Vehicle to be Exported:	No
Intended De-registration Date:	18 Apr 2018
Vehicle Make:	MAN
Vehicle Model:	NL320F (A22)
Primary Colour:	Multi-Colour
Manufacturing Year:	2012
Engine No.:	50333642443356
Chassis No.:	WMAA22ZZ2D7001775
Maximum Power Output:	-
Open Market Value:	\$252,433.00
Original Registration Date:	08 Apr 2013
First Registration Date:	08 Apr 2013
Transfer Count:	0
Actual ARF Paid:	\$0.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Rebate Amount:	\$0.00
Total Rebate Amount:	\$0.00

The information contained herein is correct as at 18 Apr 2018

OK