

INS. CASE OWNER:

Kc.

CC 4 / ASM1800

7523, Khas

LKK:

IDAC:

41125

Surveyor:

Kenneth

DOI:

ASSIGNMENT

24/4/18

Date / Time :

20/04/2018

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

SGH 4134X

Name of Insured :

LAT YOUN SONG

Insured Tel No. :

HP:

Excess Sec II :SS

D.O.A :

19/04/18

Is driver the owner?

(YES / NO)

Nature of Accident :

Claim No. :

SGM008600

Policy No. :

6A037687

Make / Model :

7-MSH

Place of Accident :

Bantley Rd

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

SKR 5265M

SGH 4134X

SKR 2894D



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

SKR 2894D, X; SGH 4134X, X

- To check damage consistency.

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\$

(e.g. Tow/ Independent)

Legal Cost

S\$

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

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

ASSIGNMENT

From: _____ Date: 24042018
 Estimated Cost: _____
 OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: SKA 2894D
 at Workshop m/s Lai Huat (Hong Kee)
 of Sin Ming
 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: 865k
 IDAC Accident Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 06 days Res.: Yes or No
 Lum Sum: 1.8.1% 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SKA 2894D Ir Regn: 11, 14
 Type: ☒ M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: 1 Honda Jazz C.C. 1488
 Colour: M. Blue A/C: Insured / Std / NI / NA
 Sp. Reading: 44715 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: J1HMGK5850FX201558
 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: 185/55R16
 R: _____
 BS: ☒ DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or _____
 Front: _____ Rear: _____
 R/Bal. 9 mm R/Bal. 9 mm
 L/Bal. 9 mm L/Bal. 9 mm
 D.O.A. 19/4/18 D.O.I. 24/4/18
 Survey held at _____
 Des. of Damages: Frt / ☒ Rear / O/S / N/S / U/C / Rooftop or

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

Date / Time	Action / Instruction
<u>25/4</u>	<u>File pass to Carver</u>

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:

S + RS. SI

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: Singapore NRIC
Owner ID: 9987Z

Vehicle Details

Vehicle No.: SKQ2894D
Vehicle to be Exported: Yes
Intended De-registration Date: 19 Apr 2018
Vehicle Make: HONDA
Vehicle Model: JAZZ 1.5 VTIR CVT ABS D/AIRBAG 2WD
Primary Colour: Blue
Manufacturing Year: 2014
Engine No.: L15B31000127
Chassis No.: JHMGK5850FX201558
Maximum Power Output: 96.0 kW (128 bhp)
Open Market Value: \$16,000.00
Original Registration Date: 18 Nov 2014
First Registration Date: 18 Nov 2014
Transfer Count: 0
Actual ARF Paid: \$6,000.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 17 Nov 2024
PARF Rebate Amount: \$4,500.00

Intended COE Rebate Details

COE Expiry Date: 17 Nov 2024
COE Category: A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years): 10
QP Paid: \$63,990.00
COE Rebate Amount: \$42,102.00
Total Rebate Amount: \$46,602.00

The information contained herein is correct as at 19 Apr 2018

OK