

INS. CASE OWNER:

CC 4 / III1800 8627, Aja3

LKK:

IDAC:

Surveyor: ADRIAN

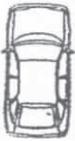
DOI: ASSIGNMENT 8/5/18

Date / Time: 7/0/18

Registered in Merimen: 10/5/18

Pre-assign / CCU / FTE

SHD 4332A



Insured Vehicle No. : \_\_\_\_\_

Claim No. : \_\_\_\_\_

Name of Insured : \_\_\_\_\_

Policy No. : \_\_\_\_\_

Insured Tel No. : \_\_\_\_\_ HP: \_\_\_\_\_

Make / Model : \_\_\_\_\_

Excess Sec II :SS \_\_\_\_\_ D.O.A : 4/5/18

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

SHQ 1233 R → SHD 4332A →

SKG 33250 → \_\_\_\_\_



INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:



INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:

01



INSRS:  
WSP: tonala  
Tel :  
Liability : TP  
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:	
	<b>Documentation Check List:</b>	<b>Handler</b> <b>Typist</b>
	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"/>
<b>PRELIMINARY ADVICE</b> Date/Time: _____ Sent By: _____	Post-Repair Photos:	<input type="checkbox"/> <input type="checkbox"/>
	Others:	<input type="checkbox"/> <input type="checkbox"/>
<b>FINALIZATION</b> Date/Time: _____ Confirm with: _____ Confirm by: _____		
Repair Cost: S\$ _____ ( _____ days) Reduction: _____ % Email <input type="checkbox"/> Call <input type="checkbox"/>		
<b>FINAL SETTLEMENT</b> 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:	
<b>Total:</b> S\$ _____ <b>Global Sum S\$:</b> _____		
<b>FINAL PAYMENT</b> 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: _____		

REF: III

ASSIGNMENT

10/10/08

From: \_\_\_\_\_ Date: 08052018

Estimated Cost: \_\_\_\_\_

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

To inspect Vehicle No: SKG 3325B

at Workshop m/s Tanala Automotive

of 25 Kaki Bukit Rd 4 #07-56

Insured: Synergy @ KB

Policy No. \_\_\_\_\_

Claims No. \_\_\_\_\_

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: Cheryl - 9838 5899

(Policy Condition) call her before go

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

N/S	O/S

Bal. or Market Value: \_\_\_\_\_

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: SKG3325B Yr Regn: 2008 / Oct.

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

Truck / Trailer or \_\_\_\_\_

Make: Toyota Allion c.c 1496

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

Sp. Reading: 170182. T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: NZT2603030057

Gen. Cond:  Good / Fair / Poor / Burnt

Steering:  In order / Jammed / Leaked / Burnt or

Brake:  In order / Jammed / Leaked / Burnt or

Modi: Nil /  S/Rim STD A/Rim or

Tyre Size: F: 185/70 R14.

R: 185/70R14.

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

TOYO / YOKO or \_\_\_\_\_

Front	Rear
R/Bal. 06 mm	R/Bal. 06 mm
L/Bal. 06 mm	L/Bal. 06 mm
D.O.A. _____	D.O.I. 08/05/18.

Survey held at Tanala Automotive

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
	TP 111
	MV: 13K
	PV: 7.9K
	Nett: 5.1K.

Date/Time, File Pass to?  : Preli. Report

1)  : Final Report

Date/Time, File Return to? \_\_\_\_\_

2) \_\_\_\_\_

Report Format : \_\_\_\_\_

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

Days Of Repair: 1948k

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

Add Fee:  : Site Insp (\$ \_\_\_\_\_)

: Interview (\$ \_\_\_\_\_)

: Tech. Invs (\$ \_\_\_\_\_)

: Weekend (\$ \_\_\_\_\_)

Other: \_\_\_\_\_

TOTAL \_\_\_\_\_

### Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	1948K
Vehicle Details	
Vehicle No.:	SKG3325B
Vehicle to be Exported:	Yes
Intended De-registration Date:	08 May 2018
Vehicle Make:	TOYOTA
Vehicle Model:	ALLION 1.5 A
Primary Colour:	Red
Manufacturing Year:	2008
Engine No.:	1NZD133707
Chassis No.:	NZT2603030057
Maximum Power Output:	81.0 kW (108 bhp)
Open Market Value:	\$14,582.00
Original Registration Date:	10 Oct 2008
First Registration Date:	10 Oct 2008
Transfer Count:	1
Actual ARF Paid:	\$14,582.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	09 Oct 2018
PARF Rebate Amount:	\$7,291.00
Intended COE Rebate Details	
COE Expiry Date:	09 Oct 2018
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
QP Paid:	\$13,801.00
COE Rebate Amount:	\$578.00
<b>Total Rebate Amount:</b>	<b>\$7,869.00</b>

The information contained herein is correct as at 08 May 2018

OK