

INS. CASE OWNER:

CC 4/Asm 1800 8851, U ea3

LKK:

IDAC:

45268

Surveyor:

mjkew

DOI:

ASSIGNMENT

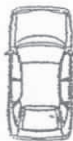
6/6/18

Date / Time:

15/5/2018

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No.:

SGG 8928 B

Name of Insured:

Sua Song Tink & Sua Song Tink

Claim No.:

S8m00H3J

Insured Tel No.:

HP:

Excess Sec II :SS

D.O.A

8/5/2018

Make / Model:

Place of Accident:

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

SJP 43487



INSRS:

WSP:

Tel:

Liability:

RMKS:

SME



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

SJP 43487 - X; SGG 8928 B - X

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:

8/6

Sent By:

Hm

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:

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

AYA /

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SJP 43487

at Workshop m/s Sme

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.

N/S	O/S

Bal. or Market Value: 30

IDAC Accident Rpt: _____ Consistent?: Yes or No

SIA / 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: SJP 43487 Yr Regn: 3, 09

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

Truck / Trailer or CA /

Make: BMW 320i c.c. 1995

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

Sp. Reading: 128554 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: W3AWK52040 PE13643

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: _____

R: 225/45R17

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

TOYO / YOKO or continued /

Front 6 mm Rear 6 mm

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. 8/5/18 D.O.I. 6/6/18

Survey held at _____

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

Rear

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

Date / Time Action / Instruction

inner charges damaged 27A 24087 10m.

Date/Time, File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee:

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

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Report Format :

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

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	0089B
Vehicle Details	
Vehicle No.:	SJP4348T
Vehicle to be Exported:	No
Intended De-registration Date:	07 Jun 2018
Vehicle Make:	B.M.W.
Vehicle Model:	320i A
Primary Colour:	Black
Manufacturing Year:	2008
Engine No.:	N46B20BA958I298
Chassis No.:	WBAWK52040PE13643
Maximum Power Output:	125.0 kW (167 bhp)
Open Market Value:	\$47,381.00
Original Registration Date:	25 Mar 2009
First Registration Date:	25 Mar 2009
Transfer Count:	1
Actual ARF Paid:	\$47,381.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	24 Mar 2019
PARF Rebate Amount:	\$23,690.00
Intended COE Rebate Details	
COE Expiry Date:	24 Mar 2019
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
QP Paid:	\$5,001.00
COE Rebate Amount:	\$397.00
Total Rebate Amount:	\$24,087.00

The information contained herein is correct as at 07 Jun 2018

OK



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GV Credit Pte Ltd **StarAd**



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bmw 320

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Any

2009

Any

**BMW 3 Series 320i XL****\$32,800**

\$9,960 /yr

17-Aug-2009

1,995 cc

11

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Posted: 06-Jun-2018 Tags: 2009 BMW 320i, BMW 320i, BMW, 320i, Used BMW

**BMW 3 Series 320i****\$25,800**

\$8,710 /yr

14-Apr-2009

1,995 cc

10

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**BMW 3 Series 320i****\$34,800**

\$8,830 /yr

23-Dec-2009

1,995 cc

90

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Autolink Holdings Pte Ltd

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**BMW 3 Series 320i****\$29,800**

\$9,560 /yr

29-May-2009

1,995 cc

91

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