15/5/2010			9223	ATAZ KI	K :		
INS. CASE OWNER	₹:	CC / AIG1800	1000	IDA	iC:		
	10	ASSIGN	MENT		21/10		
Surveyor:	- Jul	DOI:	(8/18	Date / Time :	24/4	· V	
Pre-assign / CCU	/FTE i /	(Appl 1		Registered in Merimen:	0 3	0	
	UX,	(804 L	Claim No.				
Insured Vehicle No). :					(1 x	
Name of Insured :			Policy No.				
The same of the sa		HP:	Make / Model				
Excess Sec II :S\$		D.O.A: 18(3) 18	Place of Accid	ent:			
Is driver the owner	,	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				
SGR 7 543B							
INSRS: WSP: FW W Tel: Liability: RMKS:	INSRS WSP: Tel: Liabilit RMKS	y:	INSRS: WSP: Tel: Liability: RMKS:		INSRS: WSP: Tel: Liability: RMKS:		
Date/ Time							
	SGRZKYBB	X: GX 4804 (, X	STAGE Non-Reporting ltr (1st):	DATE / PI	C	
	VI. 4 5 1 7 0			Non-Reporting ltr (2nd):			
				Non-Reporting ltr (Final): Notification ltr (if non-pic			
				Call OI:	мер).		
				After call ltr to OI:			
				Notification Itr (if non-pic		it	
				After call ltr to OI:	Kup)		
				Authorisation To Act:			
				Release Voucher:			
				Final Repair Bill:			
				Car Rental Invoice: Towing Invoice			
				LTA / GIA :			
				Medical Bill:			
				PIR:			
				Mandate/Reject Instruct	tion:		
				LOD			
PRELIMINARY ADVICE	Data/Time:	Sent By:		Payment Breakdown For Post-Repair Photos:	rm:		
I RELIMINARI ADVICE	Date/Time.	Sent By.		Others:			
FINALIZATION	Date/Time:	Confirm with:		Confirm by:			
Repair Cost:	S\$ (days) Reduction:	%	Ema	ail Call		
FINAL SETTLEMENT	Date/Time:	Confirm with		Email Call]		
Final Liability:		Assessed) BOLA S/N No.:		If NO or B 28, Ass. Lia	:		
Repair Cost:	S\$	down					
Loss of Rental (LOR): Loss of Use (LOU):	S\$ (S\$ (\$ x	days)					
Loss of Income (LOI):	S\$ (\$ x	days)					
LOR only LOU only		OR + LOI Tick only on	el				
GIA/LTA Search	S\$						
Medical:	S\$			1) Claim status: Norma	/Reject/Private Settle		
Disbursement:	S\$	(e.g. Tow/ Independe	ent)	2) Report Format:	31		
Legal Cost	S\$	01110 00		3) Survey fee:	-		
Total:	S\$	Global Sum S\$:		Email Call			
FINAL PAYMENT	Date/Time:	Confirm with:		EHIAH CAH	4		
Payee 1:	S\$	Name 1: Name 2:					
Payee 2: (Strike if N.A.) Payee 3: (Strike if N.A.)	S\$ S\$	Name 3:					
7 \		THE RESIDENCE OF THE PARTY OF T	OF THE REAL PROPERTY AND ADDRESS.	The second secon			

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ASSIGNMENT |

From: Date:	Veh No: 36 K73 43 P. Yr Regn: 9089 / NOV				
Estimated Cost:	Type: M.Car M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /				
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or				
To Inspect Vehicle No:	Make: Nissen Fairlady c.c 3696				
at Workshop m/s	Colour While - A/g: Insured / Std / NI / NA				
of	Sp.Reading 85809. T/Radio: Insured / Std / NI / NA				
Insured:	Eng/No:				
Policy No.	Eng/No: JNIGAAZ3420600234				
Claims No.	Gen. Cond: Good DFair / Poor / Burnt				
Sum Insured: Excess:	Steering: Inorder P Jammed / Leaked / Burnt or				
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or				
Make of Veh:	Modi: Nil /S/Rim) STD A/Rim or				
*	Tyre Size: F: 245/40R/9				
(Policy Condition)	R: 245/40R19.				
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /				
repair at the time of inspection.	TOYO/YOKO or Continental.				
Bal. or Market Value:	Front Rear				
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. O. mm R/Bal. O. mm				
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 06 mm L/Bal. 06 mm				
Est. Repairs: days Res.: Yes or No	D.O.A. D.O.I. 2105/18				
Lum Sum: % 3 Val.: Yes or No	Survey held at SW Weck Z (Chairs)				
01 / 25/ / 255 / 04/25	Des. of Damages : Frt / Rear / O/S N/S U/C / Rooftop or				
CA / REV / REP. / 24 HRS Vehicle: IN / OU					
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.				
Date / Time Action / Instruction	The first of the second				
TPALG					
mv 501c					
PV:257K					
Nett: 20.3K.					
Percentage of the Company of the Com					
Date/Time, File Pass to? : Preli. Report	Days Of Repair:				
i) : Final Report	Resurvey No. of Trip: Survey Fee:				
Date/Time, File Return to?	Transportation:				
2) Add Fe	ee:: Site Insp (\$)S+RSSI				
	: Interview (\$) Photos .				
Report Format :	: Tech. Invs (\$) Others				
Lump Sum / I.B.I: (\$)	:Weekend (\$)				
	TOTAL				

Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Vehicle Details Vehicle No.

Vehicle to be Exported:

Intended De-registration Date:

Vehicle Make:

Vehicle Model:

Manufacturing Year:

Engine No.

Chassis No.

Maximum Fawer Output:

Open Market Value:

First Registration Date:

Actual ARF Paid:

Intended PARF Rebate Details

PARF Eligibility:

PARF Eligibility Expiry Date: PARE Rebate Amount:

Intended COE Rebate Details

COE Expiry Date:

COE Category:

COE Perico, Years):

OP Paid:

COE Rebate Amount

Total Rebate Amount:

Company

5585M

SGR7543B

Yes

20 May 2018

NISSAN

370Z 3.7L SMT ABS D/AB HID 2WD 2DR

White

2009

VQ37101817A

JN1GAAZ34Z0600224

245.0 kW (328 bhp)

\$49,547.00

25 Nov 2009

25 Nov 2009

2

\$49,547.00

Yes

24 Nov 2019

\$27,250.00

24 Nov 2019

E - Open Category

10

\$17,905.00

\$2,461.00

\$29,711.00

The information contained herein is correct as at 20 May 2018

OK



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EAE Parents' Talk 1 June

Republic Polytechnic

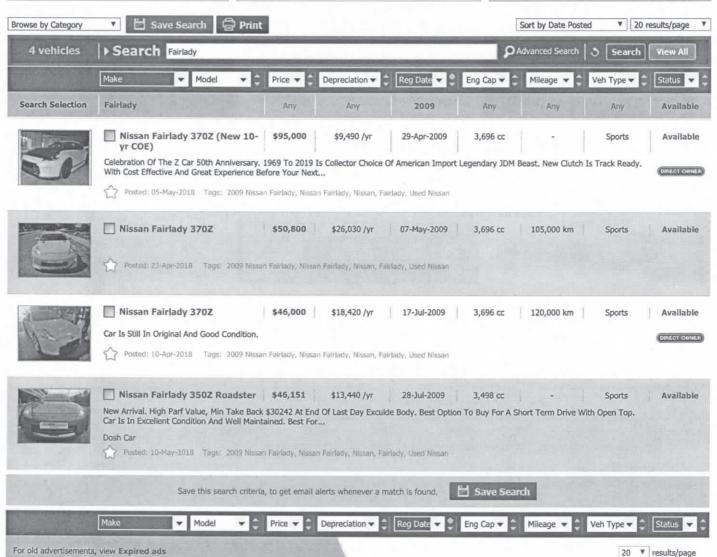
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