

INS. CASE OWNER:

CC 4 / UPC 1800 9339 / HUA3

LKK:

IDAC:

Surveyor:

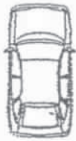
DOI:

ASSIGNMENT

Date / Time:

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

Name of Insured :

Insured Tel No. :

Excess Sec II :S\$

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



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

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:

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:

ASS. REC. BY: Adrian King**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.

N/S	O/S

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

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SKJ7354A Yr Regn: 2013 / MayType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Audi A6 Avant c.c. 1984Colour: Silver A/C: Insured / Std / NI / NASp. Reading: 26032 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WAUZZZ4GSDW121783Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 225/55R17R: 225/55R17

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

TOYO / YOKO or

Front

Rear

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. _____ D.O.I. 20/05/18Survey held at PremiumDes. 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>TP Lon Pae</u>
	<u>MV: 95K</u>
	<u>PV: 711K</u>
	<u>Nett: 24K</u>

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:	7133B
Vehicle Details	
Vehicle No.:	SKJ7354A
Vehicle to be Exported:	Yes
Intended De-registration Date:	30 May 2018
Vehicle Make:	AUDI
Vehicle Model:	A6 AVANT 2.0 TFSI MU
Primary Colour:	Silver
Manufacturing Year:	2013
Engine No.:	CDN331992
Chassis No.:	WAUZZZ4G5DN121783
Maximum Power Output:	132.0 kW (177 bhp)
Open Market Value:	\$40,966.00
Original Registration Date:	06 May 2013
First Registration Date:	06 May 2013
Transfer Count:	0
Actual ARF Paid:	\$35,966.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	05 May 2023
PARF Rebate Amount:	\$25,176.00
Intended COE Rebate Details	
COE Expiry Date:	05 May 2023
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
QP Paid:	\$92,901.00
COE Rebate Amount:	\$45,801.00
Total Rebate Amount:	\$70,977.00

The information contained herein is correct as at 30 May 2018

OK



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2 vehicles | **Search** A6 Avant 2.0A TFSI MU Advanced Search Search View All

Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Audi	A6 Avant 2.0A TFSI MU	\$83,800	\$14,780 /yr	10-Jul-2012	1,984 cc	73,000 km	Stationwagon	Available

☐ **Audi A6 Avant 2.0A TFSI MU** | **\$83,800** | **\$14,780 /yr** | **10-Jul-2012** | **1,984 cc** | **73,000 km** | **Stationwagon** | **Available**

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Posted: 19-May-2018 Tags: 2012 Audi A6, Audi A6, Audi, A6, Used Audi

☐ **Audi A6 Avant 2.0A TFSI MU** | **\$107,000** | **\$14,800 /yr** | **28-Feb-2014** | **1,984 cc** | **60,000 km** | **Stationwagon** | **Available**

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Posted: 28-May-2018 Tags: 2014 Audi A6, Audi A6, Audi, A6, Used Audi

Save this search criteria, to get email alerts whenever a match is found. Save Search

Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
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SHORTLISTED HISTORY

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