15/5/2010

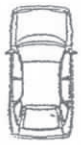
INS. CASE OWNER: WILSON | CC 4 / LCR 1800 9839 / K WA3 | LKK: IDAC:

ASSIGNMENT

Surveyor: KW DOI: 31/5/2018 Date / Time : 31/5/18

Registered in Merimen: 31/5/18

Pre-assign / CCU / FTE



Insured Vehicle No. : SLQ 3124H Claim No. : 823803819056 (H+

Name of Insured : LEE PIL Policy No. :

Insured Tel No. : HP: Make / Model : T. IMUS

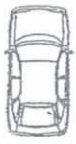
Excess Sec II :S$ D.O.A : 26/05/2018 Place of Accident : BISHAN ST 13

Is driver the owner? (YES / NO) Nature of Accident :

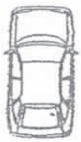
If NO, Driver Name / Age : KARUPPAIYA KALAIVANAN OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SLT7563Z → → →

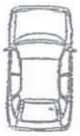


INSRS:
WSP: K. KUMUTHAN
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SLT7563Z - X ; SLQ 3124H 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:	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$		1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$	(e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$		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 | REF: AIG

ASSIGNMENT

From: | Date: 31/05/2018

Estimated Cost:

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

To Inspect Vehicle No: SLT 75632

at Workshop m/s K. Kim Hin Auto

of 160 Sin Ming Drive # 02-20

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 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 (up)

Date: | Person Contacted: | Vehicle: IN / OUT

Veh No: SLT 7563Z Yr Regn: 11/17

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

Make: Hyundai Elantra (A) c.c 1591

Colour M. P. Beige A/C: Insured / Std / NI / NA

Sp.Reading 11066 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: KMHD841CMJU571474

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: 205/55R16

R: —

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Kumho

Front		Rear	
R/Bal.	9 mm	R/Bal.	9 mm
L/Bal.	9 mm	L/Bal.	9 mm
D.O.A.	26/5/18	D.O.I.	31/5/18

Survey held at ✓

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

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

Date / Time	Action / Instruction
1/6	file pass to Catherine

Date/Time. File Pass to?

1)

Date/Time. File Return to?

2)

☐ : Preli. Report

☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee: ☐ : Site Insp ($) ___S + RS ___SI

☐ : Interview ($) Photos

☐ : Tech. Invs ($) Others

☐ : Weekend ($)

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:	9349E
Vehicle Details	
Vehicle No.:	SLT7563Z
Vehicle to be Exported:	No
Intended De-registration Date:	28 May 2018
Vehicle Make:	HYUNDAI
Vehicle Model:	ELANTRA AD 1.6 GLS AT
Primary Colour:	Beige
Manufacturing Year:	2017
Engine No.:	G4FGHU672377
Chassis No.:	KMHD841CMJU571474
Maximum Power Output:	93.8 kW (125 bhp)
Open Market Value:	$13,943.00
Original Registration Date:	10 Nov 2017
First Registration Date:	10 Nov 2017
Transfer Count:	0
Actual ARF Paid:	$13,943.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	09 Nov 2027
PARF Rebate Amount:	$10,457.00
Intended COE Rebate Details	
COE Expiry Date:	09 Nov 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	$42,902.00
COE Rebate Amount:	$40,541.00
Total Rebate Amount:	**$50,998.00**

The information contained herein is correct as at 28 May 2018

OK