

INS. CASE OWNER:

CC 4 / III180 10945, Kha3

LKK:

IDAC:

Surveyor:

Kenneth

DOI:

ASSIGNMENT

13-6-18

Date / Time :

13-6-18

Registered in Merimen:

18-6-18

Pre-assign / CCU / FTE



Insured Vehicle No. : SHC 3801 A

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : S\$ _____ D.O.A : 11-6-18

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

SGZ 7232 G

INSRS: cheng Hoo
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time

SGZ 7232 G, x; SHC 3801 A, 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:	Confirm with:	Confirm by:
FINALIZATION		Date/Time:	(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\$				
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:			

REF:

III

ASSIGNMENT

From:

Date:

13/06/2018

Estimated Cost:

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

To inspect Vehicle No:

SGZ 7232G

at Workshop m/s

Cheng Hoe Motor

of

B1K 1019 Yishun Ind. Prk A #01-374

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

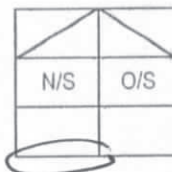
(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its

repair at the time of inspection.



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:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

up

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SGZ 7232G

Yr Regn:

11, 07

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

Truck / Trailer or

Make:

Mit Laru GLX C.C.

1584

Colour

M. Silver

A/C: Insured / Std / NI / NA

Sp. Reading

123984

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

JMYSTCS3A8U 002768

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

195/60R15

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

5

mm

R/Bal.

5

mm

L/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

11/6/18

D.O.I.

13/6/18

Survey held at

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

14/6

File pass to Coroner

Date/Time. File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time. File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

) \$ + RS. \$ SI

) Photos

) Others

TOTAL

Report Format :

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

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

> **Back to OneMotoring**

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	6098C
Vehicle Details	
Vehicle No.:	SGZ7232G
Vehicle to be Exported:	No
Intended De-registration Date:	12 Jun 2018
Vehicle Make:	MITSUBISHI
Vehicle Model:	LANCER 1.6 A
Primary Colour:	Silver
Manufacturing Year:	2007
Engine No.:	4G18JL1124
Chassis No.:	JMYSTCS3A8U002768
Maximum Power Output:	79.0 kW (105 bhp)
Open Market Value:	\$12,064.00
Original Registration Date:	15 Nov 2007
First Registration Date:	15 Nov 2007
Transfer Count:	1
Actual ARF Paid:	\$13,152.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	14 Nov 2027
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
PQP Paid:	\$41,994.00
COE Rebate Amount:	\$39,567.00
Total Rebate Amount:	\$39,567.00

The information contained herein is correct as at 12 Jun 2018

OK