12/2010

INS. CASE OWNER: CC3 / LPC 180 (0947) / Klea3

LKK:

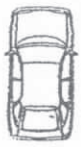
IDAC:

ASSIGNMENT

Surveyor: AWK DOI: 14-6-18 Date / Time : 14-6-18

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : SLT 3927 J Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 14-6-18 Place of Accident :

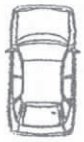
Is driver the owner? (YES / NO) Nature of Accident :

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

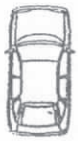
Driver Tel No. : (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SHO 1212 H → → →

INSRS:
WSP: Premier
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SHO1212H. X ; SLT3927 J. 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:	

(08/11/13)

Surveyor: Kelvin

REF:

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 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

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

Veh No: SHP1212H Yr Regn: 22 Mar, 2017

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

Make: Hyundai 230 c.c 1.5 &...

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

Sp.Reading 74455 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: TMAD281MVHJ125061

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inoperat / Jammed / Leaked / Burnt or _____

Brake: Inoperat / Jammed / Leaked / Burnt or _____

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

Tyre Size; F: 195/65R15

R: _____

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

Front		Rear	
R/Bal.	7 mm	R/Bal.	7 mm
L/Bal.	7 mm	L/Bal.	7 mm
D.O.A.	14/6/18	D.O.I.	14/6/18

Survey held at Premier

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

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

Date / Time	Action / Instruction
	Loop ac

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) _____

☐ : Prell. Report

☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ : Tech. Invs ($ _____)

☐ : Weekend ($ _____)

Report Format : _____

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

Survey Fee:	
Transportation:	
___$ + RS___SI	
Photos	
Others	
TOTAL	

Land Transport Authority

Enquire Vehicle Registration Details

Owner Particulars

NRIC/Passport/Company Cert No.:	200304975H
Owner ID Type:	Company
Owner Name:	PREMIER TAXIS PTE. LTD.
Registered Address:	23 CHANGI SOUTH AVENUE 2 #04-03 SINGAPORE 486443
Mailing Address:	-
Birth Date:	-

Vehicle Particulars

Vehicle No.:	SHD1212H
Previous Vehicle No.:	-
Effective Date of Ownership:	22 Mar 2017
Original Regn Date:	22 Mar 2017
Registration Date:	22 Mar 2017
Year of Manufacture:	2016
Vehicle Type:	Public Transport Taxi (Motor Car)

Vehicle Scheme:	Taxi (Company)
Vehicle Attachment 1:	Air-Con (Taxi)
Vehicle Attachment 2:	-
Vehicle Attachment 3:	-
Vehicle Make:	HYUNDAI
Vehicle Model:	I30 GDH 1.6 TCI 5DR DCT
Primary Colour:	Silver
Secondary Colour:	-
Passenger Capacity:	4
Chassis No.:	TMAD281UVHJ125061
Engine No.:	D4FBGZ115766
Engine Capacity / Power Rating:	1582 cc / -
Maximum Power Output:	100.0 kW (134 bhp)
Propellant:	Diesel
Max Unladen Weight:	1496 kg
Maximum Laden Weight:	1940 kg
Open Market Value:	$21,046.00
PARF Eligibility:	Yes

PARF Eligibility Expiry Date:	21 Mar 2025
Minimum PARF Benefit:	$8,379.00
No. of Transfers:	0
IU Label No.:	1050700046
COE No.:	2017032201004195G
COE Expiry Date:	21 Mar 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Registration Category:	A - Car up to 1600cc & 97kW (130bhp)
Quota Premium (QP) / Prevailing Quota Premium:	- / $49,429.00
PQP Paid:	$39,544.00
QP (Regn Cat):	- -
OPC Cash Rebate Eligibility:	No
QP during COE Bidding Exercise:	$0.00
Additional Registration Fee Rate:	First $20,000.00 (100%), next $1,046.00 (140%)
Actual ARF Paid:	$13,965.00
Vehicle Lifespan Expiry Date:	21 Mar 2025
CO2 Emission:	127.00 (g/km)

CEV/VES Rebate Utilised Amount:	$7,500.00
CO Emission:	-
HC Emission:	-
NOx Emission:	-
PM Emission:	-

Message:

The vehicle will be de-registered upon expiry of its 8-year COE on 21 Mar 2025. No further renewal will be allowed. This is a public service vehicle.