INS. CASE OWNER	3:	CC6/LOR 180	11665,	A was LKI		
		ASSIGNM		0	21(11.0	
Surveyor:	mg	DOI: N	6/18	Date / Time :	26/6/18	
				Registered in Merimen:	76 [6 [48	
Pre-assign / CCU	/FTE	1,722 M				
Insured Vehicle No	o. : SLR	ASSIM	Claim No.	;		
Name of Insured	:		Policy No.	:		N
Insured Tel No.		HP:	Make / Model		l	11
Excess Sec II :SS		D.O.A: 23 6 2018	Place of Accide			
Is driver the owner	? (YES / NO)	Nature of Accident :	1 1100 01 110010			
If NO, Driver Nar		Thursday II	OI GIA DEDO	RT: YES / NO ; TP GIA	DEDORT: VES / NO	
Driver Tel		(V/L: YES / NO)	Insured Liabili		al? Yes/No	
SEM 284	e4 €		T			
INSRS:	INSRS		INSRS:		INSRS:	
WSP: Best S	olution WSP:		WSP:		WSP:	
Liability:	Tel : Liabilit	y:	Tel: Liability:		Tel: Liability:	
RMKS:	RMKS	1/16-11/1	RMKS:		RMKS:	
Date/ Time						
	Con Stay a	X: SLOVENIM	N - X	STAGE	DATE / PIC	
	1/1000	0-1		Non-Reporting ltr (1st): Non-Reporting ltr (2nd):		
				Non-Reporting ltr (Final):		
				Notification ltr (if non-pic Call OI:	kup):	
				After call ltr to OI:		1
				Documentation Check L	ntation Check List: Handler Typist	
				Notification ltr (if non-pic	kup)	
				After call ltr to OI:		-
				Authorisation To Act: Release Voucher:		+
				Final Repair Bill:		
				Car Rental Invoice:		
				Towing Invoice		
	4			LTA / GIA :		
1				Medical Bill: PIR:		
				Mandate/Reject Instruct	ion:	
				LOD	on.	
		-	M.	Payment Breakdown Fo	rm:	
PRELIMINARY ADVICE	Date/Time:	Sent By:	. 60	Post-Repair Photos:		
FINALIZATION	Date/Time:	Confirm with:		Others: Confirm by:		
Repair Cost:	S\$ (days) Reduction:	%	Confirm by:	il 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\$	2 5				_
Loss of Rental (LOR): Loss of Use (LOU):	S\$ (S\$ (\$ x	days) days)				-
Loss of Income (LOI):	S\$ (\$ x	days)				
LOR only LOU only		OR + LOI [Tick only one]				
GIA/LTA Search	S\$					
Medical:	S\$	/ m // .		1) Claim status: Normal	Reject/Private Settle	
Disbursement: Legal Cost	S\$ S\$	(e.g. Tow/ Independent)	Report Format: Survey fee:		
Total:	SS	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	IGNMENT 17/07/09.				
Form Date:	Veh No: SFWS844G Yr Regn: 2009, July.				
From: Date: Estimated Cost:	Typer 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: Honda Stream c.c 1799.				
at Workshop m/s	Colour Brey. A/C: Insured / Std / NI / NA				
of	Sp.Reading 17307 . T/Radio: Insured / Std / NI / NA				
Insured:	Eng/No:				
Policy No.	C/NO: JHMRN68F08C2OC441				
Claims No.	Gen. Cond: 200d / Fair / Poor / Burnt				
Sum Insured: Excess:	Steering: Inorder / 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: 215/50217-				
(Policy Condition)	R: 215/50R17,				
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				
Bal. or Market Value:	<u>Front</u> <u>Rear</u>				
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 06 mm R/Bal. 06 mm				
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 96 mm L/Bal. 96 mm				
Est. Repairs: days Res.: Yes or No	D.O.A. D.O.I. 26/06/18				
Lum Sum: % 3 Val.: Yes or No	Survey held at Best Solution . /				
CA / REV / REP. / 24 HRS	Des. of Damage Prt Rear O/S / N/S / U/C / Rooftop or				
Vehicle: IN / OUT					
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.				
Date / Time Action / Instruction					
((())					
MV : 24.51C					
3V: 16-HIC					
Nett: 8.1K.					
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 Fed					
Burd Franch	: 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		
Owner ID Type:	Singapore NRIC	
Owner ID:	1257C	
Vehicle Details		
Vehicle No.:	SFW5844G	
Vehicle to be Exported:	Yes	
Intended De-registration Date:	26 Jun 2018	
Vehicle Make:	HONDA	
Vehicle Model:	STREAM 1.8L AT RSZ	
Primary Colour:	Grey	
Manufacturing Year:	2009	
Engine No.:	R18A13850441	
Chassis No.:	JHMRN68809C200441	
Maximum Power Output:	103.0 kW (138 bhp)	
Open Market Value:	\$26,644.00	
Original Registration Date:	17 Jul 2009	_
First Registration Date:	17 Jul 2009	
Transfer Count:	1	
Actual ARF Paid:	\$26,644.00	
Intended PARF Rebate Details		117011
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	16 Jul 2019	
PARF Rebate Amount:	\$14,654.00	
Intended COE Rebate Details	· 大连大大师 (2011年) 1917年 (1911年) 1918年 (1911年) 1918年 (1911年) 1918年 (1911年) 1918年 (1911年) 1918年 (1911年) 1918年 (1911年)	B 10 B
COE Expiry Date:	16 Jul 2019	
COE Category:	B - Car (1601cc & above)	
COE Period(Years):	10	
QP Paid:	\$16,801.00	
COE Rebate Amount:	\$1,771.00	
Total Rebate Amount:	\$16,425.00	
-1		

The information contained herein is correct as at 26 Jun 2018



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