15	5/5/2010		-	6, CTI 1:	125 /8	, Afas	LKK:		
D	NS. CASE OWNER		- 00	0/0(1)	80 '	/ " \ \	IDAC:		
		\ /	NP		IGNMENT		6/2/2	8/0	
S	Surveyor:			DOI:	9/2/2018	Date / Time :	019/	.0 /0	
						Registered in Mer	imen:		
P	re-assign / CCU	/ FTE	CB 6568	T					
In In	nsured Vehicle No	). ;	00 63 60	1	Claim No.				
村	Name of Insured			7	Policy No.				
L_U			IID						
H	nsured Tel No.		HP:	21/1/2010		Make / Model :			
	Excess Sec II :SS	-	D.O.A :		Place of A	ccident :			
Is	s driver the owner	? (YES	/ NO ) Nature o	f Accident :					
I	f NO, Driver Nan				OI GIA RE	OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO			
	Driver Tel	No. :	(	V/L: YES / NO )	Insured Lia	ability: %	Final? Yes/No	,	
	S/CC 230	6	<b>&gt;</b>	-			-		
_				-					
11 1)	NSRS:	And E	INSRS: WSP:		INSRS:		INSRS:		
	VSP: T/CM	1	Tel:	1-7	WSP: Tel:	1	WSP: Tel:		
L	liability:	K-	Liability:	8-9	Liability	. 8-9	Liability:		
R	RMKS:	LYL.	RMKS:		RMKS:	(VIII)	RMKS:		
Da	ate/ Time								
		8402306	rAtani	20016100 A	EPL-2-108/4-6/11	STAGE	D	ATE / PIC	
		860000	1 - OSIBOLLE	1008/2011	1-(00,100)-014	Non-Reporting ltr (			
		CB 686X7	MIMITEL	9201111	65A: 15/08/4	Non-Reporting ltr (			
			1	, , , , , ,		Notification ltr (if n			
						Call OI:			
						After call ltr to OI:			
						Documentation Cl	neck List: Handler	Typist	
						Notification ltr (if n	on-pickup)		
						After call ltr to OI:			
						Authorisation To A	ct:		
						Release Voucher:			
						Final Repair Bill:		37	
				8		Car Rental Invoice:			
						Towing Invoice			
						LTA / GIA :			
						Medical Bill:			
						PIR:			
						Mandate/Reject In	struction:		
						LOD			
DDEI IMIN	NARY ADVICE	Data/Tima:		Sent By:		Payment Breakdo			
LYELIVIII	VARI ADVICE	Date/Time.		Schi Dy.		Post-Repair Photo Others:	S:		
FINALIZA	TION	Date/Time:		Confirm with:		Confirm by:			
Repair Cost		S\$	( days)	Reduction:	%	commin oy,	Email Call		
The second secon	TTLEMENT	Date/Time:	Confirm			Email Call			
Final Liabili		%	(Agreed / Assessed			If NO or B 28, As			
Repair Cost		S\$			1				
Loss of Ren	ital (LOR):	S\$	( days)						
Loss of Use	(LOU):	S\$	(\$ x days	)					
Loss of Inco		S\$	(\$ x days						
LOR only	LOU only	LOR + LO	DU LOR + LOI	[Tick only	y one]				
GIA/LTA S	earch	S\$				1) 201 1			
Medical:		S\$		/ m- // 1	an dant \		ormal/Reject/Privat	e Settle	
Disburseme	ent:	S\$		(e.g. Tow/ Indepe	endent)	Report Format:     Survey fee:			
Legal Cost Total:		S\$ S\$	Global	Sum SS:		J) Survey Ice.			
FINAL PA	YMENT	Date/Time:	Confirm			Email Call			
	A 1788217 A	S\$	Name 1:			can			
Payee 1:	trika if NI A V	S\$	Name 1:						
	trike if N.A.) trike if N.A.)	S\$	Name 2:						
ayee 3. (8)	uike ii iv.A.)	33	raine 3.						

ASSI	GNMENT
	1

From: Date:	Veh No: SICC 230 G, Yr Regn: 2010, Jule
Estimated Cost:	Type 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: Volus C 30 T5 c.c 2521.
at Workshop m/s	Colour While A/C: Insured/Std/NI/NA
of	Sp.Reading 173 486 T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	C/No: YVIMK6759A2197931
Claims No.	Gen. Cond: Good) Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder Jammed / Leaked / Burnt or
(Client's Record)	Brake: (norder) Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim ( STD A/Rim or
	Tyre Size: F: 225/40 R/8
(Policy Condition)	R: 225/40R18.
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:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 06 mm R/Bal. 06 mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. 06 mm L/Bal. 06 mm
Est. Repairs: days Res.: Yes or No	D.O.A. D.O.I. 06/07/18
Lum Sum: % 3 Val.: Yes or No	Survey held at Payn Ubi
CA / DEV / DED / 24 UDS	Des. of Damages (Frt) / Rear / O/S / N/S / U/C / Rooftop or
CA / REV / REP. / 24 HRS  Vehicle: IN / OUT	21
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
TP Clim TK Molor	
MV: 36K.	
PV: 26.7K	
NeH: 9.31C	
Date/Time, File Pass to? : Preli. Report	ays Of Repair:
: Final Report	esurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
Add Fee:	: Site Insp -(\$ )s+Rssi
	: Interview (\$ ) Photos
Report Format :	: Tech. Invs (\$ ) Others
ump Sum / LB.I: (\$	:Weekend (\$
	TOTAL

## > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC		
Owner ID:	0343C		
Vehicle Details	Total Commence of the Commence		
Vehicle No.:	SKC230G		
Vehicle to be Exported:	Yes		
Intended De-registration Date:	06 Jul 2018		
Vehicle Make:	VOLVO		
Vehicle Model:	C30 T5 R-DESIGN 2.5 AT ABS D/AB 2WD 3DR		
Primary Colour:	White		
Manufacturing Year:	2010		
Engine No.:	B5254T4431269		
Chassis No.:	YV1MK6759A2197931		
Maximum Power Output:	169.0 kW (226 bhp)		
Open Market Value:	\$36,381.00		
Original Registration Date:	15 Jun 2010		
First Registration Date:	15 Jun 2010		
Transfer Count:	3		
Actual ARF Paid:	\$36,381.00		
ntended PARF Rebate Details	and the property of the control of		
PARF Eligibility:	Yes		
PARF Eligibility Expiry Date:	14 Jun 2020		
PARF Rebate Amount:	\$20,009.00		
ntended COE Rebate Details			
COE Expiry Date:	14 Jun 2020		
COE Category:	E - Open Category		
COE Period(Years):	10		
QP Paid:	\$39,000.00		
COE Rebate Amount:	\$6,708.00		
Total Rebate Amount:	\$26,717.00		

The information contained herein is correct as at 06 Jul 2018

