

INS. CASE OWNER:

Wmair Ho

CC 4, ASM 180 14262, Kpa3

LKK:

IDAC:

61790

Surveyor:

KSC

DOI:

ASSIGNMENT

6/8/2018

Date / Time :

6/8/2018

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SKZ 7799R
 Name of Insured : Lim Lay Hong
 Insured Tel No. : HP: 31812018
 Excess Sec II :SS D.O.A: 31812018
 Is driver the owner? (YES / NO) Nature of Accident :
 If NO, Driver Name / Age : Lim 728 W81
 Driver Tel No. : 81231521 (V/L: YES / NO)

Claim No. : 58M00R0P
 Policy No. : P2035899
 Make / Model : T-Harrier
 Place of Accident : EXIT BLDG IN MCE

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO
 Insured Liability : % Final ? Yes / No



INSRS:
 WSP: LYB
 Tel :
 Liability :
 RMKS:



INSRS:
 WSP:
 Tel :
 Liability :
 RMKS:



INSRS:
 WSP:
 Tel :
 Liability :
 RMKS:



INSRS:
 WSP:
 Tel :
 Liability :
 RMKS:

Date/ Time

SKZ 6098E, X; SKZ 7799R - 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\$
 Disbursement: S\$ (e.g. Tow/ Independent)
 Legal Cost S\$
 1) Claim status: Normal/Reject/Private Settle
 2) Report Format:
 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:

ASS. REC. BY:

REF:

A/A/

Kenneth

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.

Bal. or Market Value:

B B, 800

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

06 days

Res.: Yes or No

Lum Sum:

20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

SL16098E

Yr Regn:

12/11/08

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

Truck / Trailer or

Make:

NIS Sunny S.S

c.c

1.5 PF

Colour:

M. P. white

A/C:

Insured / Std / NI / NA

Sp. Reading

135926

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

JNICKAN168 0107508

Gen. Cond:

Good / Fair / Poor / Burnt

Steering:

In order / Jammed / Leaked / Burnt or

Brake:

In order / Jammed / Leaked / Burnt or

Modi:

NII / 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

Palken

Front

Rear

R/Bal.

7

mm

R/Bal.

7

mm

L/Bal.

7

mm

L/Bal.

7

mm

D.O.A.

3/8/18

D.O.I.

6/8/18

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

7/8

File pass to Catherine Nicks, not ready

Date/Time, File Pass to?

☐

: Prell. Report

Days Of Repair:

1)

☐

: Final Report

Resurvey No. of Trip:

Date/Time, File Return to?

2)

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

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:	0305Z
Vehicle Details	
Vehicle No.:	SLF6098E
Vehicle to be Exported:	No
Intended De-registration Date:	07 Aug 2018
Vehicle Make:	NISSAN
Vehicle Model:	SUNNY SS1.6A
Primary Colour:	White
Manufacturing Year:	2007
Engine No.:	QG16422401
Chassis No.:	JN1CFAN16Z0107508
Maximum Power Output:	81.0 kW (108 bhp)
Open Market Value:	\$13,592.00
Original Registration Date:	12 Nov 2008
First Registration Date:	12 Nov 2008
Transfer Count:	2
Actual ARF Paid:	\$13,592.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	11 Nov 2018
PARF Rebate Amount:	\$6,796.00
Intended COE Rebate Details	
COE Expiry Date:	11 Nov 2018
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
QP Paid:	\$10,455.00
COE Rebate Amount:	\$272.00
Total Rebate Amount:	\$7,068.00

The information contained herein is correct as at 07 Aug 2018

OK