

INS. CASE OWNER:

CC 6, MG 180 149.4, Uja3

LKK:  
IDAC:

Surveyor: MARENS

ASSIGNMENT  
DOI: 16/8/18

Date / Time: 16/8/18  
Registered in Merimen: 16/8/18

Pre-assign / CCU / FTE

GBH 5208U



Insured Vehicle No. : \_\_\_\_\_

Claim No. : \_\_\_\_\_

Name of Insured : \_\_\_\_\_

Policy No. : \_\_\_\_\_

Insured Tel No. : \_\_\_\_\_ HP: \_\_\_\_\_

Make / Model : \_\_\_\_\_

Excess Sec II :S\$ \_\_\_\_\_ D.O.A: 13/8/18

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

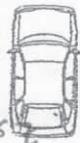
Driver Tel No. : \_\_\_\_\_ (V/L: YES / NO )

Insured Liability : % Final ? Yes / No

SLL 8474H →



INSRS: New Tel  
WSP: kb  
Tel: kb  
Liability: kb  
RMKS: no - 5958



INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:



INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:



INSRS:  
WSP:  
Tel:  
Liability:  
RMKS:

Date/ Time	STAGE	DATE / PIC
<u>SLL 8474H</u>	Non-Reporting ltr (1st):	
<u>16/08/18</u>	Non-Reporting ltr (2nd):	
<u>17/08/18</u>	Non-Reporting ltr (Final):	
<u>17/08/18</u>	Notification ltr (if non-pickup):	
	Call OI:	
	After call ltr to OI:	
	Documentation Check List:	Handler Typist
	Notification ltr (if non-pickup)	<input type="checkbox"/> <input type="checkbox"/>
	After call ltr to OI:	<input type="checkbox"/> <input type="checkbox"/>
	Authorisation To Act:	<input type="checkbox"/> <input type="checkbox"/>
	Release Voucher:	<input type="checkbox"/> <input type="checkbox"/>
	Final Repair Bill:	<input type="checkbox"/> <input type="checkbox"/>
	Car Rental Invoice:	<input type="checkbox"/> <input type="checkbox"/>
	Towing Invoice	<input type="checkbox"/> <input type="checkbox"/>
	LTA / GIA :	<input type="checkbox"/> <input type="checkbox"/>
	Medical Bill:	<input type="checkbox"/> <input type="checkbox"/>
	PIR:	<input type="checkbox"/> <input type="checkbox"/>
	Mandate/Reject Instruction:	<input type="checkbox"/> <input type="checkbox"/>
	LOD	<input type="checkbox"/> <input type="checkbox"/>
	Payment Breakdown Form:	<input type="checkbox"/> <input type="checkbox"/>
	Post-Repair Photos:	<input type="checkbox"/> <input type="checkbox"/>
	Others:	<input type="checkbox"/> <input type="checkbox"/>
<b>PRELIMINARY ADVICE</b> Date/Time: _____ Sent By: _____		
<b>FINALIZATION</b> Date/Time: _____ Confirm with: _____ Confirm by: _____		
Repair Cost: S\$ _____ ( _____ days) Reduction: _____ % Email <input type="checkbox"/> Call <input type="checkbox"/>		
<b>FINAL SETTLEMENT</b> Date/Time: _____ Confirm with _____ Email <input type="checkbox"/> Call <input type="checkbox"/>		
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 <input type="checkbox"/> LOU only <input type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/> [Tick only one]		
GIA/LTA Search S\$ _____		
Medical: S\$ _____		
Disbursement: S\$ _____ (e.g. Tow/ Independent )		1) Claim status: Normal/Reject/Private Settle
Legal Cost S\$ _____		2) Report Format:
Total: S\$ _____ Global Sum S\$: _____		3) Survey fee:
<b>FINAL PAYMENT</b> Date/Time: _____ Confirm with: _____ Email <input type="checkbox"/> Call <input type="checkbox"/>		
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) wef

ASS. REC. BY: Mercus

REF:

A167

**ASSIGNMENT**

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s S2L8474H

of Yew Kee

Insured: \_\_\_\_\_

Policy No. \_\_\_\_\_

Claims No. \_\_\_\_\_

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

N/S	O/S

Remark: The veh had commenced its repair at the time of inspection.

Bal. or Market Value: 28

IDAC Accident Rpt: \_\_\_\_\_ Consistent?: Yes or No

GIA / PR Seen: 2 Consistent?: Yes or No

Est. Repairs: \_\_\_\_\_ days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

59588

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Veh No: S2L8474H Yr Regn: 11 07

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

Truck / Trailer or CA

Make: Toyota wish c.c 1794

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

Sp.Reading: 178938 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: 2NE100384130

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 195/65R15

R: \_\_\_\_\_

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

TOYO / YOKO or

Front 6 Rear 6

R/Bal. \_\_\_\_\_ mm R/Bal. \_\_\_\_\_ mm

L/Bal. 0 mm L/Bal. 6 mm

D.O.A. 13/8/18 D.O.I. 16/8/18

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
<u>19/11/2022</u>	<u>L7A21363</u>

Date/Time, File Pass to?  : Preli. Report  
 : Final Report

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Date/Time, File Return to?

Add Fee:  : Site Insp (\$ \_\_\_\_\_ )  
 : Interview (\$ \_\_\_\_\_ )  
 : Tech. Invs (\$ \_\_\_\_\_ )  
 : Weekend (\$ \_\_\_\_\_ )

Survey Fee:	
Transportation:	
S + RS, SI	
Photos	
Others	
TOTAL	

Report Format : \_\_\_\_\_  
Lump Sum / I.B.I: (\$ \_\_\_\_\_ )

> **Back to OneMotoring****Enquire PARF/COE Rebate for Registered Vehicle**

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	5958Z
<b>Vehicle Details</b>	
Vehicle No.:	SLL8474H
Vehicle to be Exported:	No
Intended De-registration Date:	16 Aug 2018
Vehicle Make:	TOYOTA
Vehicle Model:	WISH 1.8 A
Primary Colour:	Blue
Manufacturing Year:	2007
Engine No.:	1ZZ2978992
Chassis No.:	ZNE100384130
Maximum Power Output:	97.0 kW (130 bhp)
Open Market Value:	\$16,313.00
Original Registration Date:	20 Nov 2007
First Registration Date:	20 Nov 2007
Transfer Count:	3
Actual ARF Paid:	\$17,945.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	19 Nov 2022
COE Category:	B - Car (1601cc & above)
COE Period(Years):	5
PQP Paid:	\$25,084.00
COE Rebate Amount:	\$21,363.00
<b>Total Rebate Amount:</b>	<b>\$21,363.00</b>
<b>Message</b>	
Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 16 Aug 2018

OK

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- Car Aftermarket
- On The Move
- Lifestyle

Toyota Wish 1.8A X (COE till 08/2022)

Overview Financial Accessories Similar Research Photos Map



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Add to Shortlist Add to Compare Add a Note Report Error More Actions Share

Car Details

Price	\$30,500	?
Depreciation	\$7,590 /yr	?
Reg Date	23-Aug-2007 (4yrs 6days COE left)	?
Manufactured	2007	?
Mileage	-	?
Transmission	Auto	?
Engine Cap	1,794 cc	?
Road Tax	\$1,069 /yr	?
Power	97.0 kW (130 bhp) View specs of the Toyota Wish (2008-2009)	?
Curb Weight	1,300 kg	?
Features	SRS Airbags, ABS, Reliable And Fuel Efficient 1.8L VVTI Engine, Digital Auto Climate Aircon.	?
Accessories	Leather Seats, Sports Rims, Audio System.	?
Description	Elegant Black MPV, Low Maintenance Cost, Low Fuel Consumption, Very Well Maintained, Drive Away With Minimum Down Payment, Flexible In-house Loan Packages Available.	?
COE	\$25,486	?
OMV	\$16,372	?
ARF	\$18,010	?
Dereg Value	\$20,487 as of today (change)	?
No. of Owners	2	?
Type of Veh	MPV	?
Category	COE Car	?
Availability	Available	?

Add to Shortlist Add to Compare Add a Note

Posted on: 12-Aug-2018 | Last Updated on: 15-Aug-2018  
Tags: Toyota Wish, 2007 Toyota Wish, Toyota, Wish, Used Toyota



Seller Information

Company	Prime Motor & Leasing » dealer's pricelist » 65 vehs sold   143 vehs available
Address	31 West Coast Highway #01-19/20 Search cars nearby this location
Location	West Coast Car Mart
Office No	67782233
Contact Person(s)	Danny 83661373 Roy 86864422



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