

INS. CASE OWNER:

CC 4, ALB 180 14938, Kua3

LKK:
IDAC:

Surveyor: Kenneth

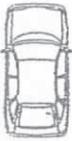
DOI: ASSIGNMENT 30/8/2018

Date / Time: 16/8/18

Registered in Merimen: 16/8/18

Pre-assign / CCU / FTE

SFB 3028U



Insured Vehicle No. : _____

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :SS _____ D.O.A: 12/3/18

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

SKT 2434H →



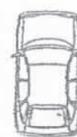
INSRS: Accord auto.
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	STAGE	DATE / PIC
<u>SKT 2434H - X</u>	Non-Reporting ltr (1st):	
<u>SFB 3028U - X</u>	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)	<input type="checkbox"/>
	After call ltr to OI:	<input type="checkbox"/>
	Authorisation To Act:	<input type="checkbox"/>
	Release Voucher:	<input type="checkbox"/>
	Final Repair Bill:	<input type="checkbox"/>
	Car Rental Invoice:	<input type="checkbox"/>
	Towing Invoice	<input type="checkbox"/>
	LTA / GIA :	<input type="checkbox"/>
	Medical Bill:	<input type="checkbox"/>
	PIR:	<input type="checkbox"/>
	Mandate/Reject Instruction:	<input type="checkbox"/>
	LOD	<input type="checkbox"/>
	Payment Breakdown Form:	<input type="checkbox"/>

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\$ _____

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: _____

> [Back to OneMotoring](#)

Enquire Transfer Fee

Vehicle No.:	SKT2434H			
Vehicle Type:	P11 - Passenger Station Wagon/Jeep/Land Rover			
Vehicle Attachment 1:	With Sun Roof			
Vehicle Scheme:	Normal			
Vehicle Make:	KIA			
Vehicle Model:	SORENTO 2.4(A) GDI HID S/R			
Chassis No.:	KNAPH813MF5077438			
Propellant:	Petrol			
Engine No.:	G4KJFA638248			
Engine Capacity:	2359 cc			
Maximum Power Output:	138.0 kW (185 bhp)			
Maximum Laden Weight:	2510 kg			
Unladen Weight:	1785 kg			
Year Of Manufacture:	2015			
Original Registration Date:	28 May 2015			
Lifespan Expiry Date:	-			
COE Category:	B - Car above 1600cc or 97kW (130bhp)			
Quota Premium:	\$77,600.00			
COE Expiry Date:	27 May 2025			
Road Tax Expiry Date:	27 Nov 2018			
PARF Eligibility Expiry Date:	27 May 2025			
Inspection Due Date:	27 May 2020			
Intended Transfer Date:	15 Aug 2018			
CO2 Emission:	205.00 (g/km)			
CEV/VES Rebate Utilised Amount:	-			
CO Emission:	-			
HC Emission:	-			
NOx Emission:	-			
PM Emission:	-			
Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee(s) payable.				
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.				
		Amount Before GST	GST Amount	Amount After GST
		(\$)	(\$)	(\$)
Transfer Fee:	25.00	-	25.00	
Total Amount Payable:				25.00

You may print this page for reference.

OK

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