15/5/2010 INS. CASE OWNER:		CC 6 / ALG 180	15810 , 1	ea3 LKK:	
Surveyor:	DOPLA	ASSIGNM DOI: ASSIGNM	ENT	Det /Time	8/8/2018
Pre-assign / CCU /			1.0	Date / Time : Registered in Merimen:	29 18/2018
	skr 54	195 Y			
Insured Vehicle No.	1	1	Claim No.	:	
Name of Insured	1		Policy No.	:	
Insured Tel No.		HP:	Make / Model	:	
Excess Sec II :S\$		D.O.A: 1918/2018	Place of Accide	ent :	
Is driver the owner?		Nature of Accident :			
If NO, Driver Nam			OI OI 4 PEDO:	DE 1770 (NO	
Driver Tel N		(V/L: YES / NÕ)	Insured Liabilit	RT: YES / NO ; TP GIA RE ty: % Final?	PORT: YES / NO Yes / No
SUF 4698	1 SU	35×5K	SKR 51	195 Y	SJZ 8436T
INSRS: WSP: Tel: Liability: RMKS:	INSRS: WSP: Tel: Liability RMKS:	y:	INSRS: WSP: Tel: Liability: RMKS:	V	NSRS: VSP: CWHWEE iability: TP MKS:
Date/ Time	1				
	ST284367, X;	SCR SURS Y	X	STAGE	DATE / PIC
	20.0 (, 0 (,	1 1 1 1		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:	THE RESERVE OF THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER.
				Notification ltr (if non-pickup After call ltr to OI:)
				Authorisation To Act:	
				Release Voucher:	
				Final Repair Bill:	
				Car Rental Invoice:	
4				Towing Invoice	
				LTA/GIA:	
				Medical Bill:	
				PIR:	
				Mandate/Reject Instruction	
				LOD	
				Payment Breakdown Form	
PRELIMINARY ADVICE	Date/Time:	Sent By:		Post-Repair Photos:	
				Others:	
FINALIZATION	Date/Time:	Confirm with:		Confirm by:	
Repair Cost:	S\$ (days) Reduction:	%	Email	Call
FINAL SETTLEMENT	Date/Time:	Confirm with		Email Call	
Final Liability:		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 GIA/LTA Search	LOR + LOU LO	OR + LOI [Tick only one]			
Medical:	S\$	W		Claim status: Normal/Re	eiect/Private Settle
Disbursement:	S\$	(e.g. Tow/ Independent)	2) Report Format;	ojoodi iivate dette
Legal Cost	S\$	(v.g. 2007 macpondent	1	3) Survey fee:	
Total:	SS	Global Sum SS:			
FINAL PAYMENT	Date/Time:	Confirm with:		Email Call	
Payee 1:	S\$	Name 1:			
Payee 2: (Strike if N.A.)	S\$	Name 2:			
Pavee 3: (Strike if N.A.)	S\$	Name 3:			

ASSIGNMENT

From: Date:	Veh No: \$128436T. Yr Regn: 2010, WC				
Estimated Cost:	Type: 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: Suzuki 3×4. c.c 1586				
at Workshop m/s	Colour Black . A/C: Insured / Std / NI / NA				
of	Sp.Reading 92835 T/Radio: Insured / Std / NI / NA				
Insured:	Eng/No:				
Policy No.	C/No: JSAGYA21SOD 334064				
Claims No.	Gen. Cond: Good / Fair / Poor / Burnt				
Sum Insured: Excess:	Steering: Inpler / Jammed / Leaked / Burnt or				
(Client's Record)	Brake: Infer / Jammed / Leaked / Burnt or				
Make of Veh:	Modi: Nil S/Rim / STD A/Rim or				
	Tyre Size: F: 205/60R16				
(Policy Condition)	R: 205/BORIG				
Remark: The veh had commenced its N/S 0/S	BS / DUN / EXNOVA / GY / FS / LIZA MIG / 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. 06 mm				
Est. Repairs: days Res.: Yes or No	D.O.A. D.O.I. 28/08/18				
Lum Sum: % 3 Val.: Yes or No	Survey held at Sin Huee.				
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / (Cea) / O/S / N/S / U/C / Rooftop or				
CA / REV / REP. / 24 HRS Vehicle: IN / O	UT				
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.				
Date / Time Action / Instruction	•				
TP AlG.					
MV : 261C					
PV: 20.41C					
Nett: 5.6K					
Date/Time, File Pass to? : Preli. Report	Days Of Repair:				
: Final Report	Resurvey No. of Trip: Survey Fee:				
Date/Time, File Return to?	Transportation:				
2) Add F	ee: : Site Insp (\$)s+Rssi				
	: 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		Int
Owner ID Type:	Singapore NRIC	
Owner ID:	1947Z	
Vehicle Details		
Vehicle No.:	SJZ8436T	
Vehicle to be Exported:	Yes	
Intended De-registration Date:	28 Aug 2018	
Vehicle Make:	SUZUKI	
Vehicle Model:	SX4 HATCHBACK 1.6 AT	
Primary Colour:	Black	
Manufacturing Year:	2010	
Engine No.:	M16A1515296	
Chassis No.:	JSAGYA21S00334064	
Maximum Power Output:	82.0 kW (109 bhp)	
Open Market Value:	\$15,992.00	
Original Registration Date:	30 Dec 2010	
First Registration Date:	30 Dec 2010	
Transfer Count:	1	
Actual ARF Paid:	\$15,992.00	
Intended PARF Rebate Details	and a production of the production between the contract of the	SI III
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	29 Dec 2020	
PARF Rebate Amount:	\$9,595.00	
Intended COE Rebate Details		BR
COE Expiry Date:	29 Dec 2020	
COE Category:	A - Car (1600cc & below)	
COE Period(Years):	10	
QP Paid:	\$46,129.00	
COE Rebate Amount:	\$10,775.00	
Total Rebate Amount:	\$20,370.00	

The information contained herein is correct as at 28 Aug 2018



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