INS. CASE OWNER	Ł	CC 4/M 180	(6715)	1 263 DAC:		
	and	ASSIGN	MENT	121	6/10	
Surveyor:		DOI:	118	Date / Time : 19	31911	
Pre-assign / CCU	/FTE COL	021111		Registered in Merimen.	111110	
Insured Vehicle N	SYY	85113	Claim No.			
14						
Name of Insured			Policy No.	:		
Insured Tel No.	! <u></u>	HP:	Make / Model			
Excess Sec II :S\$		D.O.A: 111018	Place of Accid	ent:		
Is driver the owner	r? (YES / NO)	Nature of Accident :				
If NO, Driver Na	me / Age :		OI GIA REPO	RT: YES / NO ; TP GIA REI	PORT: YES / NO	
Driver Tel No. :		(V/L: YES / NO.)		Insured Liability: % Final? Yes/No		
SJZ 223	,6T					
T Diana						
INSRS: WSP: WA (oluhu INSR WSP:	41 11	INSRS: WSP:	1))]	SRS: SP:	
H Tel:	Tel:	1-0	Tel:	Te Te		
Liability:	Liabil	110 -11	Liability:	11 (3	ability:	
RMKS:	RMK	S:	RMKS:	RI	MKS:	
Date/ Time						
	SPE 12367-)	C. GN83114	X	STAGE	DATE / PIC	
	010 10 17 1	1 86 1 2 3 11 1 3	/	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		
RELIMINARY ADVICE	C. Date/Time:	Sent By:		Payment Breakdown Form: Post-Repair Photos:		
1,000 1,000		community.		Others:		
NALIZATION	Date/Time:	Confirm with:	The state of the s	Confirm by:		
pair Cost:	S\$ (days) Reduction:	%	Email [Call	
NAL SETTLEMENT	Date/Time:	Confirm with		Email Call		
nal Liability:		d / Assessed) BOLA S/N No.;		If NO or B 28, Ass. Lia:		
pair Cost:	SS (1>				
ss of Rental (LOR): ss of Use (LOU):	S\$ (\$	days) x days)				
ss of Income (LOI):		x days)				
OR only LOU onl		LOR + LOI [Tick only or	ie]			
A/LTA Search	S\$					
edical:	S\$			1) Claim status: Normal/Re	ject/Private Settle	
	S\$	(e.g. Tow/ Independe	ent)	2) Report Format:		
	S\$	Global Sum SS:		3) Survey fee:	145	
gal Cost	99	CHODRI SUIII 33:				
egal Cost otal:	S\$			Email Call		
egal Cost otal: INAL PAYMENT	Date/Time:	Confirm with:		Email Call		
isbursement: egal Cost otal: INAL PAYMENT ayee 1: ayee 2: (Strike if N.A.)				Email Call		

ASSIGNMENT

From: Date:	Veh No: SJZ 2236 1. Yr Regn: 2010 / 700
Estimated Cost:	Type: M.Carl 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: Toysta Alphasa. c.c 2362
at Workshop m/s	Colour Black . A/C: Insured / Std / NI / NA
of	Sp.Reading 143017. T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	C/No: ANH208131940 .
Claims No.	Gen. Cond. Good Fair / Poor / Burnt
Sum Insured: Excess:	Steering Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil /S/Rim / STD A/Rim or
	Tyre Size: F: 225/35/R/8
(Policy Condition)	R: 225/55P18.
Remark: The veh had commenced its N/S O/S	
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
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. 13/09/18.
Lum Sum: % 3 Val.: Yes or No	Survey held at MG Solution .
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / O	
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	·
TP FWD.	
MV: 851C PV: 34.5K Nett: 20.51C	
PV : 34.5K	
Nett: 20.51C	
7401	
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	language de la constant de la consta
	: Interview (\$) Photos
Report Format :	: Tech. Invs (\$) Others
Lump Sum / I.B.I: (\$:Weekend (\$
	TOTAL

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Business
Owner ID:	1324L
Vehicle Details	AND AND DESCRIPTION OF THE PERSON OF THE PER
Vehicle No.:	SJZ2236T
Vehicle to be Exported:	Yes
Intended Deregistration Date:	13 Sep 2018
Vehicle Make:	TOYOTA
Vehicle Model:	ALPHARD 240S PRIME SELECTION A
Primary Colour:	Black
Manufacturing Year:	2010
Engine No.:	2AZF464460
Chassis No.:	ANH208131940
Maximum Power Output:	125.0 kW (167 bhp)
Open Market Value:	\$42.201.00
Original Registration Date:	04 Nov 2010
First Registration Date:	04 Nov 2010
Transfer Count:	3
Actual ARF Paid:	\$42,201.00
Intended PARF Rebate Details	THE RESIDENCE OF THE CONTRACT OF THE PARTY O
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	03 Nov 2020
PARF Rebate Amount:	\$25,320.00
Intended COE Rebate Details	The second section of the sect
COE Expiry Date:	03 Nov 2020
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$43,501.00
COE Rebate Amount:	\$9,161.00
Total Rebate Amount:	\$34,481.00

The information contained herein is correct as at 13 Sep 2018

