15/5/2010

INS. CASE OWNER: KA | CC 4, Adm 180 17178, Fpas | LKK: 30784 IDAC:

ASSIGNMENT

Surveyor: KSC DOI: 20/9/18 Date / Time : 20/9/18

Registered in Merimen: –

Pre-assign / CCU / FTE

Insured Vehicle No. :	SKE 3393 P	Claim No. :	S8M0095V
Name of Insured :		Policy No. :	
Insured Tel No. :	HP:	Make / Model :	
Excess Sec II :S$	D.O.A : 14/2/18	Place of Accident :	
Is driver the owner? (YES / NO)	Nature of Accident :		

If NO, Driver Name / Age :

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

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability : % **Final ? Yes / No**

GBE 3570B → → →

INSRS: WSP: Cheng Hoe Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	GBE3570B - NA/AG150209051/4; DOA 14/2/15
	SKE3393P. 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: P/P S$ 3081.55 (4 days) Reduction: 220.00 % 7 Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 4/6/2020 Confirm with JUNE Email ✓ Call ☐

Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 15a	If NO or B 28, Ass. Lia :
Repair Cost: (W/GST)	S$ 3297.26	
Loss of Rental (LOR):	S$ 856.00 (4 days) x $214 (W/GST)	
Loss of Use (LOU):	S$ ($ x days)	
Loss of Income (LOI):	S$ ($ x days)	
LOR only ✓ LOU only ☐ LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	S$ 8.00	
Medical:	S$	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ (e.g. Tow/ Independent)	2) Report Format: TP
Legal Cost	S$	3) Survey fee: $350.00
Total:	S$ 4161.26 Global Sum S$: 4000.00	

FINAL PAYMENT Date/Time: Confirm with: Email ✓ Call ☐

Payee 1:	S$ 4000.00	Name 1:	CHENG HOE MOTOR PTE LTD
Payee 2: (Strike if N.A.)	S$	Name 2:	
Payee 3: (Strike if N.A.)	S$	Name 3:	

ASS. REC. BY: Kenneth | REF: AXA /

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Chevy Hoe

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.

N/S	O/S

Bal. or Market Value: 8531c

IDAC Accident Rport: _____ Consistent? : Yes or No

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

Est. Repairs: 04 days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: GBE 3570B Yr Regn: 11/13

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or _____

Make: Toy Dyna c.c 2982

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

Sp.Reading 101522 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTFA735Y9ak 205033

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: 195R15X8

R: 155R 15X8 (10)

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Firestone

Front		Rear	
R/Bal.	6 mm	R/Bal.	4 4 mm
L/Bal.	6 mm	L/Bal.	4 6 mm
D.O.A.	14/2/18	D.O.I.	20/9/18

Survey held at _____

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or O/S 1/4

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
19	File pass to Catherine

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) _____

☐ : Prell. Report

☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ Tech Invs ($ _____)

☐ Weekend ($ _____)

Report Format :

Lump Sum / I.B.I: ($ _____)

Survey Fee:	
Transportation: ___$ + RS.___SI	
Photos	
Others	
TOTAL	

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	0237Z
Vehicle Details	
Vehicle No.:	GBE3570B
Vehicle to be Exported:	No
Intended Deregistration Date:	19 Sep 2018
Vehicle Make:	TOYOTA
Vehicle Model:	TOYOTA DYNA 150 MANUAL
Primary Colour:	Silver
Manufacturing Year:	2015
Engine No.:	1KD2556484
Chassis No.:	JTFAT35Y90K205033
Maximum Power Output:	-
Open Market Value:	$24,944.00
Original Registration Date:	02 Nov 2015
First Registration Date:	02 Nov 2015
Transfer Count:	0
Actual ARF Paid:	$1,248.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	$0.00
Intended COE Rebate Details	
COE Expiry Date:	01 Nov 2025
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	$16,246.00
COE Rebate Amount:	$11,564.00
Total Rebate Amount:	**$11,564.00**

The information contained herein is correct as at 19 Sep 2018

OK