INS. CASE OW	ing. PH	cc (, Asm	180 /0/128	ELPAS LKK:	76635)
Surveyor:	PA	DOI:	EIGNMENT (9<10×18	- Date / Time :	(g/p.1	Q
Pre-assign / Co	CU/FTE			Registered in Merimen:	_	
		Eugr 92 A				
Insured Vehicle	: No. :	000////	Claim No.	: Samoo	XXA	
Name of Insure	d :				,	- (x)
Insured Tel No.			Policy No.			
Excess Sec II :S		HP: 12/10/14	Make / Mode	1 :		
Is driver the own		D.O.A : (1) (1)	Place of Acci	dent:		
	(, 1	NO) Nature of Accident :				200
If NO, Driver N			OI GIA RED	OPT. VEC /NO . TO CLI DO		-
Driver T		(V/L: YES / NO)	Insured Liabi	ORT: YES / NO ; TP GIA REPO		10
EUAZA	M	SKA STOUK	m \ / .			
		2611 2.104 K>	\$76921 L -> S	LN8049S > SJ	V891K.	> SHB SA
RMKS:	or	INSRS: WSP: Tel: Liability: RMKS:	INSRS: WSP: Tel: Liability: RMKS:	141 141	ility:	
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	7713 1040	1 / 187 187 187 WALLEY	124: 15/10/18	STAGE Non-Reporting ltr (1st):	DATE/I	PIC
	FRASAS 4-	X		Non-Reporting ltr (2nd):		
				Non-Reporting Itr (Final):		
				Notification ltr (if non-pickup): Call OI:		
				After call ltr to OI:		
				Documentation Check List: H	andler Typ	int
				Notification ltr (if non-pickup)	andier Typ	ISL
				After call ltr to OI:		
				Authorisation To Act:		
				Release Voucher:		
				Final Repair Bill: Car Rental Invoice:		
				Towing Invoice	2 2	
				LTA / GIA :		
				Medical Bill:		
				PIR:		- F
				Mandate/Reject Instruction:		HSQ E
				LOD		
PRELIMINARY ADVICE	Date/Time:	Sent By:		Payment Breakdown Form:		
Tivativ		out by,		Post-Repair Photos:		
FINALIZATION	Date/Time:	Confirm with:		Others:		
Repair Cost:	S\$	(days) Reduction:	%	Confirm by:		
FINAL SETTLEMENT Final Liability:	Date/Time:	Confirm with	70	Email	Call	
Repair Cost:	% (A	agreed / Assessed) BOLA S/N No. :		Email Call		San
Loss of Rental (LOR):	22	V6		If NO or B 28, Ass. Lia:		
Loss of Use (LOU):	SS (S	(days)				
Loss of Income (LOI):	7.0	X days)				
LOR only LOU only		X days)				
GIA/LTA Search	S\$	LOR+LOI [Tick only	one]			
Medical:	S\$					
Disbursement:	S\$	(e.g. Tow/ Indepen	ndent \	1) Claim status: Normal/Reject/F	rivate Settle	
Legal Cost	S\$	(e.g. 10w/ indeper		2) Report Format;	* 2	
Total:	SS	Global Sum S\$:		3) Survey fee:	i,	
FINAL PAYMENT	Date/Time:	Confirm with:		Email Call		
Payee 1:	S\$	Name 1:		Call		
Payee 2: (Strike if N.A.) Payee 3: (Strike if N.A.)	S\$	Name 2:				
a spec 3. (ourke it N.A.)	S\$	Name 3:	1			

ASSIGNMENT Veh No: SKA \$764K Yr Regn: 2011 / PMR Estimated Cost: OD / TP / WS / TP RES / OD RES / EVA / INV / MV To Inspect Vehicle No: SKA \$764K at Workshop m/s Mova of Ska \$764K Yr Regn: 2011 / Prime Mover / Truck / Trailer or Make: Cracon Bs 3 f.6 m c.c. 1598 Colour BLW A/C: Insured / Std / NI / NA Sp. Reading 065426 T/Radio: Insured / Std / NI / NA Sp. Reading 065426 T/Radio: Insured / Std / NI / NA Eng/No: C/No: VF 75A 5F55A W586210 Gen. Cond: Good (Fa/t) / Poor / Burnt Steering: Increter / Jammed / Leaked / Burnt or Brake: Inorder / Jammed / Leaked / Burnt or Modi: Nil / S/Rim / STD A/Rim or Tyre Size: F: 2015 U5267 R: 2 - Bs / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or End! Rear	(08/11/13) REF:		411661
From: Date: Date: Standard Cost: On It was ITP RESI OD RESIEVA INV IMV To inspect Vehicle No: S.A. S. 7 L.L.K. at Workshop mis for V.G. Its year year A.D. Its year year of Year Y.D. Its year year year year year year year year		SSIGNMENT	
Truck Trailler or On the May ITP RES OD RES EVA INV Make: Colour Make	From: Date: .	Veh No: SKA 57	64K Yr Regn: 2011 / MM
To inspect Vehicle No: SKA STUK at Workshop ms MoV D of SKA STUK AXA MP Colour Sunced:	Estimated Cost:	Type: M.Car / M.Cycle / Bu	s / Van / Lorry / Taxi / Prime Mover /
Colour PLAG ACC Insured / Std / Ni / NA Insured / Std	OD (TP))WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or	
Colour State of Insured Std / NI / NA for State of State	To Inspect Vehicle No: SKA 5764K	Make: Cirrogn ?	05 3 1.6 VM c.c 1598
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. Bal. or Market Value: DAC Accident Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: Lum Sum: % 3 Val.: Yes or No Date / Time Action / Instruction Date / Time Action / Instruction Date / Time Action / Instruction Eng/No: CNo: VF7SA SF5SA W586 2 10 Gen. Cond: Good (Fay) / Poor / Burnt Stering: Illorder / Jammed / Leaked / Burnt or Modi: Nil / Sirkim / STD Al/Rim or Tyre Size: F: Just (LyRL7 R: 1 Gis / Dun / Exnova / Gy / F5 / LiZA / Mic / OHTSU / Pir / SUMI / TOYO / YOKO or Front RBal. RBal. D.O.A. (2/Lu / W. Survey held at DO.J. (2/Lu / W. Des. of Damages : Frt / Rear / O/S / Nis / U/C / Rooftop or Front The U/C / Chassis frame / Body Structure affected due to collision Date / Time Action / Instruction Date / Time Action / Instruction Date / Time, File Pass to?			
Color Colo	of 15 formy work to	Sp.Reading 6654;	T/Radio: Insured / Std / NI / NA
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Stum Insured: Client's Record	Policy No.	C/No: VF7S	45F59A WS86210
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TOTAL

Lump Sum / I.B.I: (\$

> Back to OneMotoring

Enquire PARF/CO	E Rebate for	Registered	Vehicle
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Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	4116H
Vehicle Details	
Vehicle No.:	SKA5764K
Vehicle to be Exported:	Yes
Intended Deregistration Date:	17 Oct 2018
Vehicle Make:	CITROEN
Vehicle Model:	DS3 1.6 VTI AT ABS D/AIRBAG 2WD 3DR
Primary Colour:	Blue
Secondary Colour:	White
Manufacturing Year:	2010
Engine No.:	10FHCK0996449
Chassis No.:	VF7SA5FS9AW586210
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$18,637.00
Original Registration Date:	15 Mar 2011
First Registration Date:	15 Mar 2011
Transfer Count:	0
Actual ARF Paid:	\$18,637.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	14 Mar 2021
PARF Rebate Amount:	\$11,182.00
Intended COE Rebate Details	
COE Expiry Date:	14 Mar 2021
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
QP Paid:	\$39,000.00
COE Rebate Amount:	\$9,374.00
Total Rebate Amount:	\$20,556.00

The information contained herein is correct as at 17 Oct 2018

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