15/5/2010 INS, CASE OWNER:	CL	cc 4, Asm 180	27368, A	DAS LKK: 81	(N)
Surveyor:	Lup.	DOI:	ffly Da	gistered in Merimen:	n/if
Pre-assign / CCU /	FTE (1h U)	7-T	Re	gistered in Merimen.	
Insured Vehicle No.) HV 10	10/1	Claim No. :		(××
Name of Insured	: 100	, (10	Policy No. :		000
Insured Tel No.		HP:	Make / Model :		
Excess Sec II :S\$		D.O.A: 74/11/18	Place of Accident		
		- ()	Trace of Accident	-	
Is driver the owner?	(YES/NO)	Nature of Accident :			
If NO, Driver Nam Driver Tel N		(V/L: YES / NO)	OI GIA REPORT: Insured Liability:	YES / NO; TP GIA REPORT: % Final? Yes /	
(m 6 PM	c P →				
INSRS: WSP: Tel: Liability: STW RMKS:	INSRS: WSP: Tel: Liability RMKS:		INSRS: WSP: Tel: Liability: RMKS:	INSRS: WSP: Tel: Liability RMKS:	:
Date/ Time					
	HOW STORY OFFE	Jan 1800 12 ph (1/4)	DONY PORT WILLIAM NO. C. A.	on-Reporting ltr (1st): on-Reporting ltr (2nd): on-Reporting ltr (2nd): on-Reporting ltr (Final): otification ltr (if non-pickup): all OI: fier call ltr to OI: ocumentation Check List: Hand otification ltr (if non-pickup) fier call ltr to OI: uthorisation To Act: elease Voucher: inal Repair Bill: ar Rental Invoice: owing Invoice TA / GIA : fiedical Bill: IR: Mandate/Reject Instruction:	Bler Typist
			L	OD	
				ayment Breakdown Form:	
PRELIMINARY ADVICE	Date/Time:	Sent By:		ost-Repair Photos:	
				Others:	
FINALIZATION	Date/Time:	Confirm with:		Confirm by:	Call
Repair Cost:	S\$ (days) Reduction:	%	Email Call	
FINAL SETTLEMENT	Date/Time:	Confirm with		f NO or B 28, Ass. Lia:	
Final Liability:		/ Assessed) BOLA S/N No.:	1	1 170 01 D 20, A35, DIG.	
Repair Cost:	S\$	days)			
Loss of Rental (LOR):	S\$ (days)		9.4 %	
Loss of Use (LOU):	S\$ (\$ x S\$ (\$ x	days)			
Loss of Income (LOI):		OR + LOI Tick only of	one		
LOR only LOU only	S\$	Or Love Treatmy			
GIA/LTA Search	S\$			l) Claim status: Normal/Reject/F	Private Settle
Medical:	S\$	(e.g. Tow/ Indepen		2) Report Format:	
Disbursement: Legal Cost	S\$			3) Survey fee:	
Total:	SS	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 PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	据是这种的原理。 第18章 15章 18章 18章 18章 18章 18章 18章 18章 18章 18章 18		
Owner ID Type:	Company		
Owner ID:	0190R		
Vehicle Details			
Vehicle No.:	SLW4614P		
Vehicle to be Exported:	Yes		
Intended Deregistration Date:	28 Nov 2018		
Vehicle Make:	TOYOTA		
Vehicle Model:	C-HR HYBRID 1.85 CVT		
Primary Colour:	Blue		
Manufacturing Year:	2017		
Engine No.:	2ZR8177423		
Chassis No.:	ZYX102068405		
Maximum Power Output:	90.0 kW (120 bhp)		
Open Market Value:	\$28,353.00		
Original Registration Date:	12 Feb 2018		
First Registration Date:	12 Feb 2018		
Transfer Count:	0		
Actual ARF Paid:	\$11,695.00		
Intended PARF Rebate Details	A management of the south of the south and the south of t		
PARF Eligibility:	Yes		
PARF Eligibility Expiry Date:	11 Feb 2028		
PARF Rebate Amount:	\$8,771.00		
Intended COE Rebate Details			
COE Expiry Date:	11 Feb 2028		
COE Category:	B - Car above 1600cc or 97kW (130bhp)		
COE Period(Years):	10		
QP Paid:	d: \$45,289.00		
COE Rebate Amount:	\$36,231.00		
Total Rebate Amount:	\$45,002.00		

The information contained herein is correct as at 28 Nov 2018



