

15/5/2010

CS3/ASM18023038/Upa3

LKK:

IDAC:

INS. CASE OWNER:

Surveyor:

DOI:

Date / Time :

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

Name of Insured :

Insured Tel No. :

Excess Sec II :S\$

Is driver the owner? (YES / NO)

If NO, Driver Name / Age :

Driver Tel No. :

(V/L: YES / NO)

Claim No. :

Policy No. :

Make / Model :

Place of Accident :

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

Insured Liability : % Final ? Yes / No

INSRS:
WSP: 2m Auto
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time

SKK 1608 C - X ; SHP 9288K - X

76/12 SHP. sent out 1st letter.

06/05/2020

Pls refer to Views for details.

*No response from TP

*Submit PRI Report to AXA

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:

S\$

(

days)

Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time:

Confirm with

Email

Call

Final Liability:

%

(Agreed / 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 ☐LOR + LOU ☐LOR + LOI ☐

[Tick only one]

GIA/LTA Search

S\$

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

1) Claim status: Normal/Reject/Private Settle /PRI

2) Report Format: PRI

3) Survey fee: \$100.00

Total:

S\$

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:

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

AYA /

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SKK160fc

at Workshop m/s J. in Bul.

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.

Bal. or Market Value: 125%

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

Est. Repairs: 3 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

AYA 114281

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SKK160fc Regn: 3113

Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or CA

Make: Lexus LS 460 c.c. 4608

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

Sp. Reading: 151147 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTH13L 46F005119669

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: _____

R: 235/50 R18

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

R/Bal. 6 mm

L/Bal. 6 mm

D.O.A. 21/1/18

Survey held at

Rear

R/Bal. 6 mm

L/Bal. 6 mm

D.O.I. 24/12/18

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

N/S 304

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

Date / Time	Action / Instruction
	Rep 1 Plk. 4 hrs - 3 hrs.
	door repair
	Repai Range : \$1,000.00 - \$2,000.00

Date/Time, File Pass to?

☐ : Preli. Report

Days Of Repair: _____

1)

☐ : Final Report

Resurvey No. of Trip: _____

Date/Time, File Return to?

2)

Add Fee:

☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

____ S + RS ____ SI

Photos

Others

TOTAL

Report Format : _____

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

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	9285D
Vehicle Details	
Vehicle No.:	SKK1608C
Vehicle to be Exported:	No
Intended Deregistration Date:	24 Dec 2018
Vehicle Make:	TOYOTA
Vehicle Model:	LEXUS LS460 AUTO
Primary Colour:	Black
Manufacturing Year:	2013
Engine No.:	1UR0331681
Chassis No.:	JTHBL46F005119669
Maximum Power Output:	280.0 kW (375 bhp)
Open Market Value:	\$106,419.00
Original Registration Date:	27 Mar 2013
First Registration Date:	27 Mar 2013
Transfer Count:	1
Actual ARF Paid:	\$106,419.00 53209
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	26 Mar 2023
PARF Rebate Amount:	\$74,493.00
Intended COE Rebate Details	
COE Expiry Date:	26 Mar 2023
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$95,990.00
COE Rebate Amount:	\$39,788.00
Total Rebate Amount:	\$114,281.00

The information contained herein is correct as at 24 Dec 2018

OK