INS. CASE OWNER: Lynn Choy. CC 4, Asm 1900 0795, T1 ea3   LKK: IDAC: 92876...

Surveyor: Toufikh   **ASSIGNMENT**   DOI: 14/1/19   Date / Time: 14.1.19.

Registered in Merimen: ___

Pre-assign / CCU / FTE

Insured Vehicle No.	: SLV3749Y	Claim No. : 59m01A3L
Name of Insured	: Siow Choon Gng	Policy No. :
Insured Tel No.	: HP:	Make / Model :
Excess Sec II :S$	D.O.A: 11.1.19	Place of Accident :
Is driver the owner?	(YES / (NO))	Nature of Accident :

If **NO**, Driver Name / Age : _____

OI GIA REPORT (YES) / NO ; TP GIA REPORT YES / (NO)

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

Insured Liability : ___ %   **Final ? Yes / No**
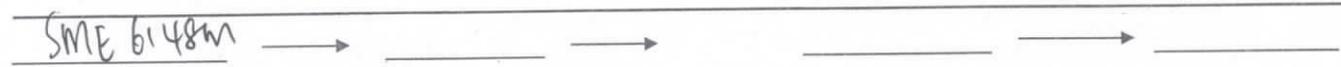
SME 6148M →   →   →   →

INSRS:	INSRS:	INSRS:	INSRS:
WSP: Icah Motor	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time		STAGE	DATE / PIC
	SmE6148M. X ; SLV3749Y, X	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$	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ (e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$	3) Survey fee:
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:

Surveyor Taufin

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

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.

$86K

	N/S	O/S

Bal. or Market Value:

IDAC Accident Rport: Consistent? : **Yes** or **No**

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

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

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

CA / REV / REP. / 24 HRS

               Vehicle: **IN / OUT**

Date: Person Contacted:

Veh No: SME 6148 M   Yr Regn: 2018 / Oct

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

Make: Honda Civic 1.6   c.c 1597

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

Sp.Reading: 6264   T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: MRHFC3650 JT001711

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: 215/55R16

          R:

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.		D.O.I.	14/1/19

Survey held at Kah Motor

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

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

Date / Time	Action / Instruction

Date/Time, File Pass to?   ☐ : **Preli. Report**

1)   ☐ : **Final Report**

Date/Time, File Return to?

2)

Report Format :

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

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp ($
           ☐ : Interview ($
           ☐ : Tech. Invs ($
           ☐ : Weekend ($

Survey Fee:
Transportation:
) S + RS. SI
) Photos
) Others
)

TOTAL

> **Back to OneMotoring**

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	5344F
Vehicle Details	
Vehicle No.:	SME6148M
Vehicle to be Exported:	No
Intended Deregistration Date:	15 Jan 2019
Vehicle Make:	HONDA
Vehicle Model:	CIVIC 1.6 VTI CVT
Primary Colour:	Blue
Manufacturing Year:	2018
Engine No.:	R16B25501979
Chassis No.:	MRHFC5650JT001711
Maximum Power Output:	92.0 kW (123 bhp)
Open Market Value:	$20,645.00
Original Registration Date:	08 Oct 2018
First Registration Date:	08 Oct 2018
Transfer Count:	0
Actual ARF Paid:	$20,903.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	07 Oct 2028
PARF Rebate Amount:	$15,677.00
Intended COE Rebate Details	
COE Expiry Date:	07 Oct 2028
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	$31,997.00
COE Rebate Amount:	$31,123.00
Total Rebate Amount:	**$46,800.00**

The information contained herein is correct as at 15 Jan 2019

OK