

INS. CASE OWNER:

CC 6, QBE 1900 2585, Aca3

LKK:

IDAC:

Surveyor:

CWP

DOI:

ASSIGNMENT

11/2/19

Date / Time :

4/12/19

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SJZ 3893P

Name of Insured :

Insured Tel No. : HP:

Excess Sec II :SS D.O.A: 11/2/19

Is driver the owner? ( YES / NO ) Nature of Accident :

Claim No. :

Policy No. :

Make / Model :

Place 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

SJX 9618P

INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:

MH1

INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:

Date/ Time

SJX 9618P - X ; SJZ 3893P - 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:

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

2) Report Format:

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:

ASS. REC. BY:

REF:

Adrian

## ASSIGNMENT

26/03/09.

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. \_\_\_\_\_

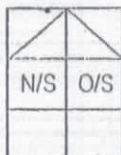
Claims No. \_\_\_\_\_

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

Remark: The veh had commenced its  
repair at the time of inspection..

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ 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: SJX968P Yr Regn: 2009 MarchType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Toyota Premio C.C. 1797Colour: Gold A/C: Insured / Std / NI / NASp. Reading: 276539 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: ZRT 2603042689Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 195/65R15R: 195/65R15

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

TOYO / YOKO or

Front

Rear

R/Bal. 26 mm R/Bal. 26 mmL/Bal. 26 mm L/Bal. 26 mmD.O.A. D.O.I. 11/02/09Survey held at NHTDes. 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

TP QBEMV: 14KPV: 12.7KNett: 1.3K

Date/Time, File Pass to?

Date/Time, File Return to?

1)

2)

3)

4)

5)

6)

Prel. Report:

Final Report:

Part Prices Check:

IN

OUT

Survey Fee:

Date:

Basic &amp; Add.

S + RS, SI

Photos

Others

TOTAL

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

|                                     |                               |
|-------------------------------------|-------------------------------|
| <b>Vehicle Owner Particulars</b>    |                               |
| Owner ID Type:                      | Limited Liability Partnership |
| Owner ID:                           | 1847F                         |
| <b>Vehicle Details</b>              |                               |
| Vehicle No.:                        | SJX9618P                      |
| Vehicle to be Exported:             | No                            |
| Intended Deregistration Date:       | 11 Feb 2019                   |
| Vehicle Make:                       | TOYOTA                        |
| Vehicle Model:                      | PREMIO 1.8X A                 |
| Primary Colour:                     | Gold                          |
| Manufacturing Year:                 | 2008                          |
| Engine No.:                         | 2ZRA215222                    |
| Chassis No.:                        | ZRT2603042689                 |
| Maximum Power Output:               | 100.0 kW (134 bhp)            |
| Open Market Value:                  | \$25,126.00                   |
| Original Registration Date:         | 26 Mar 2009                   |
| First Registration Date:            | 26 Mar 2009                   |
| Transfer Count:                     | 3                             |
| Actual ARF Paid:                    | \$25,126.00                   |
| <b>Intended PARF Rebate Details</b> |                               |
| PARF Eligibility:                   | Yes                           |
| PARF Eligibility Expiry Date:       | 25 Mar 2019                   |
| PARF Rebate Amount:                 | \$12,563.00                   |
| <b>Intended COE Rebate Details</b>  |                               |
| COE Expiry Date:                    | 25 Mar 2019                   |
| COE Category:                       | B - Car (1601cc & above)      |
| COE Period(Years):                  | 10                            |
| QP Paid:                            | \$7,589.00                    |
| COE Rebate Amount:                  | \$91.00                       |
| <b>Total Rebate Amount:</b>         | <b>\$12,654.00</b>            |

The information contained herein is correct as at 11 Feb 2019

OK