

INS. CASE OWNER:

CC 4, Asm 1900 33-J / 07pa

IDAC:

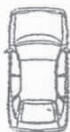
Surveyor:

DOI:

Date / Time :

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

Name of Insured :

Insured Tel No. :

Excess Sec II :SS

Is driver the owner?

(YES / NO)

Nature of Accident :

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:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

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:

Surveyor:

REF:

AXA

3371

0650J

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:

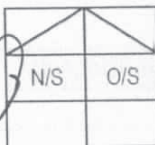
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

2

days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

FBM 7954J

Yr Regn:

09 Apr 2018

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

Truck / Trailer or

Make:

Honda CB150R c.c 149

Colour:

Blue

A/C: Insured / Std / NI / NA

Sp. Reading

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

MLHKC 2886J 5003153

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F: 110/70 R17

R: 160/60 R17

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

TOYO / YOKO or

Front

Rear

R/Bal.

6 mm

R/Bal.

6 mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

D.O.I.

22-02-19

Survey held at

w/s

4pm

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)

Date/Time, File Return to?



Final Report

2)

Days Of Repair:

Resurvey No. of Trip:

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Weekend (\$

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Report Format :

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

Bike model

Type

Any



Price From

Any



Price To

Any



Class

Any



MORE SEARCH OPTIONS ▼

Q SEARCH

VIEW ALL (/LISTING/USEDBIKES/LISTING/)

Q SEARCH ▼



REPORT ERROR > (/LISTING/LISTING/ERROR/USEDBIKE/11511/)

+ ADD TO SHORTLIST

Like 16

Share

© SHARE (WHATSAPP://SEND?TEXT=HTTPS://WWW.SGBIKEMART.COM.SG/LISTING/USEDBIKE/HONDA-HONDA-CB150R-EXMOTION/11511/)

Honda CB150R ExMotion

Listing Type

Paid Ad

Brand	Honda (/listing/usedbike/brand/honda/)
Model	Honda CB150R ExMotion (/listing/usedbike/model/honda-cb150r-exmotion/)
Engine Capacity	149cc
Classification	Class 2B
Registration Date	21/02/2019
COE Expiry Date	20/02/2029 (9 years 11 months left)
Mileage	-
No. of owners	-
Type of Vehicle	Street Bikes (/listing/usedbikes/listing/?bike_type=7)

Price: ^{SGD}\$10500

Minimum Down Payment: ^{SGD}\$1200

Est Monthly ^{SGD}\$193 for 5 years

DETAILS

Brand new CB150 Ex motion. Pre reg with FR 3 digit number plate. Golden number. Grab before gone



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SIMILAR BIKES

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Honda CB150R ExMotion

[\(/listing/usedbike/honda-honda-cb150r-exmotion/11511/\)](/listing/usedbike/honda-honda-cb150r-exmotion/11511/)



Honda CB150R ExMotion

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Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	0650J
Vehicle Details	
Vehicle No.:	FBM7954J
Vehicle to be Exported:	No
Intended Deregistration Date:	26 Feb 2019
Vehicle Make:	HONDA
Vehicle Model:	CB150R MANUAL
Primary Colour:	Blue
Manufacturing Year:	2017
Engine No.:	KC32E0003153
Chassis No.:	MLHKC2886J5003153
Maximum Power Output:	-
Open Market Value:	\$4,089.00
Original Registration Date:	09 Apr 2018
First Registration Date:	09 Apr 2018
Transfer Count:	1
Actual ARF Paid:	\$614.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	08 Apr 2028
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$7,114.00
COE Rebate Amount:	\$6,487.00
Total Rebate Amount:	\$6,487.00

The information contained herein is correct as at 26 Feb 2019

OK