

CC 4, EGI 1900 3/12 / JPA5

IDAC:

INS. CASE OWNER:

ASSIGNMENT

Surveyor:

GAS.

DOI:

20/3/19

Date / Time :

Registered in Merimen:

Pre-assign / CCU / FTE

XD 9837M



Insured Vehicle No. :

Claim No. :

Name of Insured :

Policy No. :

Insured Tel No. : HP: 251219

Make / Model :

Excess Sec II :SS D.O.A :

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. :

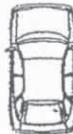
(V/L: YES / NO)

Insured Liability : % Final ? Yes / No

PC 4444 X



INSRS: WSP: Tel: Liability: RMKS: Crown Asia



INSRS: WSP: Tel: Liability: RMKS:



INSRS: WSP: Tel: Liability: RMKS:



INSRS: WSP: Tel: Liability: RMKS:

Date/ Time	STAGE	DATE / PIC
PC 4444 X - X ; XD 9837M - 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)	<input type="checkbox"/>
	After call ltr to OI:	<input type="checkbox"/>
	Authorisation To Act:	<input type="checkbox"/>
	Release Voucher:	<input type="checkbox"/>
	Final Repair Bill:	<input type="checkbox"/>
	Car Rental Invoice:	<input type="checkbox"/>
	Towing Invoice	<input type="checkbox"/>
	LTA / GIA :	<input type="checkbox"/>
	Medical Bill:	<input type="checkbox"/>
	PIR:	<input type="checkbox"/>
	Mandate/Reject Instruction:	<input type="checkbox"/>
	LOD	<input type="checkbox"/>
	Payment Breakdown Form:	<input type="checkbox"/>
	Post-Repair Photos:	<input type="checkbox"/>
	Others:	<input type="checkbox"/>

PRELIMINARY ADVICE Date/Time: Sent By: 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\$

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:

REF: CS/EG19003712/1 d3

Special Instruction

ASS. REC. BY:

Surveyor: Hwei Jie

ASSIGNMENT (Office)

EG1

Date/Time: 07/2/19 @ 10:17am

From (Person): Jeannie

of Bill to:

Estimated Cost: OD (TP) WS / TP RES / OB RES / EVA / INV / MV / CS

To Inspect Vehicle No:

PC 4444 X

Insured:

XD9837M

at Workshop m/s

Crown Asia Building
44 Sungai Kadut Ave

Tel:

69669995

Policy No:

Claim No:

CDMCG19000246/SL/JC

Excess:

D.O.A. 25/02/2019

Sum Insured:

Make of Veh:
(Client's Record)

H.O.D. Endorsement:

CA / REV / REP. / REV 24 HRS

Vehicle IN OUT

Date/Time: 10:53am @ 07/2/19 Person Contacted: Jayden

Date/Time	Action/Instruction () Estimate
	PC 4444 X-X
	XD9837M-X
02/04/19 @ 10:41 am.	Spoken with Jayden, do direct settlement pending liability from Insurance

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	3472Z
Vehicle Details	
Vehicle No.:	PC4444X
Vehicle to be Exported:	No
Intended Deregistration Date:	22 Mar 2019
Vehicle Make:	SCANIA
Vehicle Model:	KEB6X2/4 12L MT 26.4T ABS TURBO C/CAB
Primary Colour:	Multi-Colour
Manufacturing Year:	2008
Engine No.:	6407634
Chassis No.:	YS2K6X20001863020
Maximum Power Output:	-
Open Market Value:	\$174,309.00
Original Registration Date:	29 Sep 2009
First Registration Date:	29 Sep 2009
Transfer Count:	3
Actual ARF Paid:	\$8,716.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	31 Dec 2028
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$28,187.00
COE Rebate Amount:	\$27,550.00
Total Rebate Amount:	\$27,550.00

The information contained herein is correct as at 22 Mar 2019

OK