

INS. CASE OWNER:

CC 4 111 1900 6523 1MPXAS

IDAC:

Surveyor:

Rasm

DOI:

ASSIGNMENT

21/01/19

Date / Time:

11/4/19

Registered in Merimen:

12/4/19

Pre-assign / CCU / FTE



Insured Vehicle No. : SHC 2233X

Claim No. :

Name of Insured : CTR

Policy No. :

Insured Tel No. : HP:

Make / Model :

Excess Sec II :SS

D.O.A : 31/4/2019

Place of Accident :

Is driver the owner? (YES / NO)

Nature 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

YP 7134 X



INSRS:

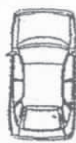
WSP:

Tel :

Liability :

RMKS:

Gingey



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date / Time

YP 7134 X - X ;

SHC 2233X - C44 111 160 22 20 60 / 46392 - 100% 20/1/19

C44 111 160 22 20 60 / 46392 - 100% 20/1/19

PIC: VIVIAN

12/6/19 seek liability under na merimen

OZD NO CCTV.

seek 50% conflicting version

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:

[> Back to OneMotoring](#)

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	1196N
Vehicle Details	
Vehicle No.:	YP7134X
Vehicle to be Exported:	No
Intended Deregistration Date:	31 Dec 2019
Vehicle Make:	MITSUBISHI
Vehicle Model:	CANTER FEB21ER4SDEB
Primary Colour:	White
Manufacturing Year:	2017
Engine No.:	4P10C75294
Chassis No.:	FEB21EA21584
Maximum Power Output:	-
Open Market Value:	\$44,319.00
Original Registration Date:	07 Sep 2017
First Registration Date:	07 Sep 2017
Transfer Count:	0
Actual ARF Paid:	\$2,216.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	06 Sep 2027
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$42,004.00
COE Rebate Amount:	\$32,273.00
Total Rebate Amount:	\$32,273.00

The information contained herein is correct as at 11 Apr 2019

OK