

INS. CASE OWNER:

ke CC 4 / Asm 1900 Job 7, U Jas IDAC: 111611

Surveyor:

UJ

DOI:

ASSIGNMENT

2/14/19

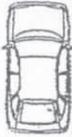
Date / Time:

18/04/19

Registered in Merimen:

Pre-assign / CCU / FTE

X02853L



Insured Vehicle No. :

OPYMUS MOTOR P/L

Claim No. :

59moikaf

Name of Insured :

Insured Tel No. :

HP:

Policy No. :

Make / Model :

Excess Sec II :SS

2500.00

D.O.A :

3/4/2019

Place of Accident :

Is driver the owner?

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

Driver Tel No. :

(V/L: YES / NO)

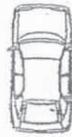
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Insured Liability :

%

Final ? Yes / No

PC91225



INSRS:

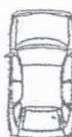
WSP:

Tel :

Liability :

RMKS:

Crownstar Bus Builder



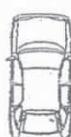
INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date / Time

7/4

7/4

PC91225-CC6/ATG1301758/ML 9224; D.O.A: 2/19/13
-CS/PCU 301748/ML 1862; D.O.A: 2/17/13
X02853L-NAFMSH 180757/24 : D.O.A: 2/11/18

2/14 OIWA. sent out 1st letter.

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\$

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:	1819W
Vehicle Details	
Vehicle No.:	PC9122S
Vehicle to be Exported:	No
Intended Deregistration Date:	25 Apr 2019
Vehicle Make:	HIGER
Vehicle Model:	KLQ6119Q 6.7L MT ABS 17T TURBO
Primary Colour:	Yellow
Manufacturing Year:	2008
Engine No.:	ISBE430021864554
Chassis No.:	LKLR1HSJ49B514501
Maximum Power Output:	-
Open Market Value:	\$114,305.00
Original Registration Date:	24 Mar 2009
First Registration Date:	24 Mar 2009
Transfer Count:	4
Actual ARF Paid:	\$5,716.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	23 Mar 2029
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$26,756.00
COE Rebate Amount:	\$26,499.00
Total Rebate Amount:	\$26,499.00

The information contained herein is correct as at 25 Apr 2019

OK