Surveyor:    Surveyor:   Surveyor:   Date / Time:   Registered in Merimen:   Tale   Date / Time:   Registered in Merimen:   Tale   Date / Time:   Date / Tim	
Pre-assign / CCU / FTE Insured Vehicle No. : Insured Tel No. : If NO, Driver Name / Age : Driver Tel No. : If NO, Driver Name / Age : Driver Tel No. : If NO, Driver Name / Age : Driver Tel No. : If NSRS: WSP: Tel : Itability : Itabili	ut a
Name of Insured   :	1151
Insured Tel No.   HP.   Make / Model :	
Excess Sec II :SS  Is driver the owner? (YES / NO) Nature of Accident:  If NO, Driver Name / Age: Driver Tel No.:  (VL: YES / NŌ)  INSRS: WSP: Tel: Liability: Liability: RMKS:  Date/Time    Non-Reporting Ir (Sh):   Non-Re	-
Is driver the owner? (YES / NO ) Nature of Accident:  If NO, Driver Name / Age: Driver Tel No.:  (V/L: YES / NO)  Insured Liability: % Final? Yes / No  SET 1446 U  DNSRS: WSP: Tel: Liability: RMKS:  Date/Time  DATE  Non-Reporting lir (Ins): Non-Rep	-,
If NO, Driver Name / Age: Driver Tel No.:  (V/L. YES / NO) Insured Liability: % Final? Yes / No  (V/L. YES / NO) Insured Liability: % Final? Yes / No  (V/L. YES / NO) Insured Liability: % Final? Yes / No  (V/L. YES / NO) Insured Liability: % Final? Yes / No  (V/L. YES / NO) Insured Liability: % Final? Yes / No  (V/L. YES / NO) Insured Liability: % Final? Yes / No  (V/L. YES / NO) Insured Liability: % Final? Yes / No  (V/L. YES / NO) Insured Liability: % Final? Yes / No  (V/L. YES / NO) Insured Liability: % Final? Yes / No  (V/L. YES / NO) Insured Liability: % Final? Yes / No  (V/L. YES / NO) Insured Liability: % Final? Yes / No  (V/L. YES / NO)  (V/L. YES / NO) Insured Liability: % Final? Yes / No  (V/L. YES / NO)  (V/L. YES / NO)  (V/L. YES / NO) Insured Liability: % Final? Yes / No  (V/L. YES / NO)  (V/L. YES / NO)  (V/L. YES / NO)  (V/L. YES / NO)  (Insured Liability: % Final? Yes / No  (V/L. YES / NO)  (V/L. YES / NO)  (NSP.  (NSP.  (V/L. YES / NO)  (NSP.  (NSP.  (V/L. YES / NO)  (NSP.  (V/L. YES / NO  (Islability: Liability: Liability: Liability: Liability: Liability: Liability: Liability: No.  (NSP.  (NSP.  (V/L. YES / NO  (NSP.  (V/L. YES / NO  (Islanding Liability: Liability	
Driver Tel No. :	
WSP: Tel: Liability: RMKS:	40
WSP: Tel:   Liability:   RMKS:	
STAGE   DATE   Non-Reporting ltr (1st):   Non-Reporting ltr (2nd):   Non-Reporting ltr (2nd):   Non-Reporting ltr (Final):   After call ltr to OI:   Decumentation Check List:   Handler   Notification ltr (if non-pickup):   After call ltr to OI:   Decumentation Check List:   Handler   Notification ltr (if non-pickup):   After call ltr to OI:   Decumentation Check List:   Handler   Notification ltr (if non-pickup):   Pinal Repair bill:   Decumentation Check List:   Handler   Notification ltr (if non-pickup):   Pinal Repair bill:   Decumentation Check List:	
Non-Reporting ltr (1st):   Non-Reporting ltr (2nd):   Non-Reporting ltr (2nd):   Non-Reporting ltr (2nd):   Non-Reporting ltr (2nd):   Notification ltr (if non-pickup):   Call OI:   After call ltr to OI:   Documentation Check List:   Handler   Notification ltr (if non-pickup)   After call ltr to OI:   Authorisation To. Act:   After call ltr to OI:   Authorisation To. Act:   Authorisation To.	
After call lit to OI:    Documentation Check List: Handler   The Notification It (if non-pickup)	PIC
Notification Itr (if non-pickup)	
After call litr to OI:  Authorisation To Act:  Release Voucher:  Final Repair Bill:  Car Rental Invoice:  Towing Invoice  LTA / GIA:  Medical Bill:  PRE:  Mandate/Reject Instruction:  LOD  Payment Breakdown Form:  PELIMINARY ADVICE Date/Time:  Sent By:  Post-Repair Photos:  Others:  INALIZATION  Date/Time:  Confirm with:  Confirm by:  epair Cost:  S\$ ( days) Reduction:  W' Email Call  In NO or B 28, Ass. Lia:  epair Cost:  S\$ ( days)  oss of Rental (LOR):  S\$ ( days)  oss of Rental (LOR):  S\$ ( days)  oss of Locome (LOI):  S\$ (\$ x days)  oss of Income (LOI):  S\$ (\$ x days)  Oss of Income (LOI):  S\$ (\$ x days)	ypist
Authorisation To Act:   Release Voucher:	
Release Voucher:	
Final Repair Bill:	
Car Rental Invoice	
Towing Invoice   LTA / GIA :   Medical Bill:   Medical Bill:   Medical Bill:   Mandate/Reject Instruction:   LOD   Payment Breakdown Form:   Post-Repair Photos:   Others:   Others:   INALIZATION   Date/Time:   Confirm with:   Confirm by:   Email   Call   INAL SETTLEMENT   Date/Time:   Confirm with   Email   Call   Inal Liability:   Mandate/Reject Instruction:   LOD   Payment Breakdown Form:   Others:	
LTA / GIA :	
PIR:	
Mandate/Reject Instruction:   LOD	
LOD	
Payment Breakdown Form:   Pettiminary Advice   Date/Time:   Sent By:   Post-Repair Photos:   Others:	
Post-Repair Photos:   Others:   Others:	
Others:	
TNALIZATION   Date/Time:   Confirm with:   Confirm by:	
Email   Call	
TNAL SETTLEMENT Date/Time: Confirm with Email Call inal Liability: % (Agreed / Assessed) BOLA S/N No.: If NO or B 28, Ass. Lia: epair Cost: S\$ coss of Rental (LOR): S\$ ( days) coss of Use (LOU): S\$ (\$ x days) coss of Income (LOI): S\$ (\$ x days)	
inal Liability:	
Oss of Rental (LOR):         S\$         ( days)           Oss of Use (LOU):         S\$         (\$ x days)           Oss of Income (LOI):         S\$         (\$ x days)	
coss of Use (LOU):         S\$         (\$ x days)           coss of Income (LOI):         S\$         (\$ x days)	
oss of Income (LOI): S\$ (\$ x days)	
DON ONLY LOUGH LOOK + LOU L LOOK + LOU L LICK ONLY ONE	
GIA/LTA Search S\$	N.J.
Medical: S\$ 1) Claim status: Normal/Reject/Private S	ettle
Disbursement: S\$ (e.g. Tow/ Independent ) 2) Report Format:	
Legal Cost S\$ . 3) Survey fee:	11,
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:	1

SS. REC. BY: March	ACCIONMENT
	ASSIGNMENT 7.13
rom: Date:	Veh No: SRJ 1 4/64 Yr Regn:
stimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
DD (TP) WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or A
To Inspect Vehicle No:	Make: Mundal Elantro c.c (5-8)
at Workshop m/s hocken	Colour A/C: Insured / Std / NI / NA T/Radio: Insured / Std / NI / NA
	Sp.Reading / 23 47 1/Radio: Insured / Std / N1/102
nsured: SDX3286	Eng/No: KMHDH41CMDU67991
Policy No.	
Claims No.	Gen. Cond. Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil /S/Rim / STD A/Rim or  Tyre Size: F: 205 / 55-26
<u></u>	
(Policy Condition)	R:
Remark. The ventilad commended its	N/S O/S BS / DUN / EXNOVA / GY / FS / LIZA MIC OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or N	-7
GIA / PR Seen: Consistent? : Yes or I	16/10
Est. Repairs: 2 days Res.: Yes or	No D.O.A. 9/4/19 D.O.I. 26/4/19
Lum Sum: /-3-/ % 3 Val.: Yes or	
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Ve	nicle: IN / OUT
Date: Person Contacted: LAA	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	1 G & 600 WIE han.
7419 CONT. TWA FITT	7 8 000
Date/Time, File Pass to? : Preli. Report	Days Of Repair:
1) : Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
	Add Fee: Site Insp (\$ )S+RS,SI
2)	
2)	: Interview (\$ ) Photos
Report Format :	: Interview (\$ ) Photos : Tech. Invs (\$ ) Others : Weekend (\$ )

## > Back to OneMotoring

**Enquire PARF/COE Rebate for Registered Vehicle** 

ehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	5562H
Vehicle Details	
Vehicle No.:	SKJ1416U
Vehicle to be Exported:	No
Intended Deregistration Date:	25 Apr 2019
Vehicle Make:	HYUNDAI
Vehicle Model:	ELANTRA 1.6 AT ABS D/AB 2WD 4DR
Primary Colour:	White
Manufacturing Year:	2012
Engine No.:	G4FGCU663591
Chassis No.:	KMHDH41CMDU679919
Maximum Power Output:	95.6 kW (128 bhp)
Open Market Value:	\$13,844.00
Original Registration Date:	25 Feb 2013
First Registration Date:	25 Feb 2013
Transfer Count:	0
Actual ARF Paid:	\$8,844.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	24 Feb 2023
PARF Rebate Amount:	\$5,748.00
Intended COE Rebate Details	
COE Expiry Date:	24 Feb 2023
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
QP Paid:	\$78,301.00
COE Rebate Amount:	\$30,048.00
Total Rebate Amount:	\$35,796.00

The information contained herein is correct as at 25 Apr 2019

ОК