

INS. CASE OWNER:

CC 4, MSN 1900 8048, 6 eas

IDAC:

114501

ASSIGNMENT

Surveyor:

XMO

DOI:

8/5/19

Date / Time:

7/5/19

Registered in Merimen:

Pre-assign / CCU / FTE

FBH 299P

59MOLLAT



Insured Vehicle No.:

Muhammad Khairul Johari B. Jumhart.

Claim No.:

Name of Insured:

Insured Tel No.:

HP:

Policy No.:

Excess Sec II :SS

D.O.A:

18/04/2019

Make / Model:

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

FBN 4498Z



INSRS:

WSP:

Tel:

Liability:

RMKS:

Looi's motor



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date/ Time

FBN 4498Z - CS3/MSA/1703306/RAV65Z ; DOA: 6/5/19

FBH 299P - CS3/MSA/1703306/RAV65Z ; DOA: 8/2/19

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: | Singapore NRIC |
| Owner ID: | 1389Z |
| Vehicle Details | |
| Vehicle No.: | FBN4498Z |
| Vehicle to be Exported: | Yes |
| Intended Deregistration Date: | 07 May 2019 |
| Vehicle Make: | APRILIA |
| Vehicle Model: | RX125 ABS MANUAL |
| Primary Colour: | Red |
| Secondary Colour: | Black |
| Manufacturing Year: | 2018 |
| Engine No.: | M545M2008760 |
| Chassis No.: | ZD4KXA005J4001332 |
| Maximum Power Output: | - |
| Open Market Value: | \$5,273.00 |
| Original Registration Date: | 03 Oct 2018 |
| First Registration Date: | 03 Oct 2018 |
| Transfer Count: | 1 |
| Actual ARF Paid: | \$887.00 |
| Intended PARF Rebate Details | |
| PARF Eligibility: | No |
| PARF Eligibility Expiry Date: | - |
| PARF Rebate Amount: | \$0.00 |
| Intended COE Rebate Details | |
| COE Expiry Date: | 02 Oct 2028 |
| COE Category: | D - Motorcycle |
| COE Period(Years): | 10 |
| QP Paid: | \$4,214.00 |
| COE Rebate Amount: | \$3,371.00 |
| Total Rebate Amount: | \$3,371.00 |

The information contained herein is correct as at 07 May 2019

OK