INS. CASE OWNER	ti .	CC 3/Mh	190 (232)	,1 bos 1 II	DAC:	
	IMP		SIGNMENT		12/02/14	1
Surveyor:	000	DOI:	171712019	Date / Time :		1
			,	Registered in Merimer	n:(ν	7119
Pre-assign / CCU		1400				51
Insured Vehicle No	sck 8	3188 X	Claim No.	:		- TAX
Name of Insured	,		Policy No.	:		
2_0						
Insured Tel No.	:	D.O.A: 1077/2019	Make / Model			-
Excess Sec II :S\$			Place of Accid	ient:	- 10	100
Is driver the owner	? ( YES / NO )	Nature of Accident :				
If NO, Driver Nam		10.00		ORT: YES / NO ; TP GI	-	/NO
Driver Tel 1		(V/L: YES / NO)	Insured Liabil	ity: % Fi	inal? Yes/No	1.40
SMA 2436	D					
INSRS: WSP: WOMAN	INSR WSP:	1) [[	INSRS: WSP:		INSRS: WSP:	
Tel:	Tel:		Tel:	10-11	Tel:	
Liability:	Liabil	ity:	Liability:	B-S	Liability:	
RMKS:	RMK	S:	RMKS:		RMKS:	
Date/ Time						
	5mA 243/60 - X	; SCK 8188	X / X	STAGE	DAT	E / PIC
				Non-Reporting ltr (1st):		
				Non-Reporting ltr (2nd)		
W.				Non-Reporting ltr (Fina Notification ltr (if non-p	Section 100	
and the state of			(14.14.00) - 10.10(14.14.14.14.14.14.14.14.14.14.14.14.14.1	Call OI:		
				After call ltr to OI:		
				Documentation Check		Typist
				Notification ltr (if non-p	pickup)	
				After call ltr to OI:		
				Authorisation To Act: Release Voucher:		
				Final Repair Bill:		
				Car Rental Invoice:		
Landin				Towing Invoice		
				LTA / GIA :		
				Medical Bill:		
			La belgar	PIR:		
				Mandate/Reject Instru	iction:	
				LOD		
EL IMPLADA A DATION	D			Payment Breakdown	Form:	
RELIMINARY ADVICE	Date/Time:	Sent By:		Post-Repair Photos: Others:		
NALIZATION	Date/Time:	Confirm with:		Confirm by:		
pair Cost:	S\$ (	days) Reduction:	%		mail Call	
NAL SETTLEMENT	Date/Time:	Confirm with	0	Email Call		
nal Liability:	% (Agreed	/ Assessed) BOLA S/N No	.:	If NO or B 28, Ass. L	ia:	
pair Cost:	S\$	*				
ss of Rental (LOR):	S\$ (	days)				
ss of Use (LOU):	S\$ (\$ x					
ss of Income (LOI):	S\$ (\$ x		-11			
OR only LOU only A/LTA Search	LOR + LOU S\$	LOR + LOI [Tick o	nly one]		The second second	45-4
A/LTA Search	S\$			1) Claim status: Norn	nal/Reject/Private	Settle
bursement:	S\$	(e.g. Tow/ Ind	ependent)	2) Report Format:		
gal Cost	S\$	(v.g. 10w/ IIId	ependent )	3) Survey fee:		
tal:	SS	Global Sum S\$:				
NAL PAYMENT	Date/Time:	Confirm with:		Email Call		
.aa 1.	S\$	Name 1:				
ayee 1:	13-0	Traine 1.				

Payee 2: (Strike if N.A.) Payee 3: (Strike if N.A.) S\$ S\$ Name 2: Name 3: ASSIGNMENT

From: Date: 12/7/2019	Veh No: SMA 2436 D- Yr Regn: 2018 / May.
Estimated Cost:	Type: M.Ca / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD (TP) WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No: SMA 2436D	Make: And; Q2 c.c 999
at Workshop m/s Premium	Colour Grey. A/C: Insured / Std / NI / NA
of 55 Ubi Road 1	Sp.Reading 3708 2 A/C: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	C/No: WAUZZZG A 4JA 058369
Claims No.	Gen. Cond: Good Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Ingger / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil (S/Rim) / STD A/Rim or
	Tyre Size: F: 2/5/60P16-
(Policy Condition)	R: 215/60R16.
Remark: The veh had commenced 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 No	R/Bal. 06 mm R/Bal. 96 mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. 06 mm L/Bal. 06 mm
Est. Repairs: days Res.: Yes or No	D.O.A. D.O.I. 12/07/19.
Lum Sum: % 3 Val.: Yes or No	'Survey held at Promise.
Lum Sum: % 3 Val.: Yes or No CA / REV / REP. / 24 HRS 1 WP)	Des. of Damages (Fr) / Rear / O/S / N/S / U/C / Rooftop or
	Des. of Damages Fr / Rear / O/S / N/S / U/C / Rooftop or
Lum Sum: % 3 Val.: Yes or No  CA / REV / REP. / 24 HRS  Vehicle: IN / OUT	Des. of Damages (Fr) / Rear / O/S / N/S / U/C / Rooftop or
Lum Sum: % 3 Val.: Yes or No  CA / REV / REP. / 24 HRS  Vehicle: IN / OUT  Date: Person Contacted:	Des. of Damages Fr / Rear / O/S / N/S / U/C / Rooftop or
Lum Sum: % 3 Val.: Yes or No  CA / REV / REP. / 24 HRS  Vehicle: IN / OUT  Date: Person Contacted:  Date / Time Action / Instruction	Des. of Damages Fr / Rear / O/S / N/S / U/C / Rooftop or
Lum Sum: % 3 Val.: Yes or No  CA / REV / REP. / 24 HRS  Vehicle: IN / OUT  Date: Person Contacted:  Date / Time Action / Instruction  Ti? Al.G.	Des. of Damages Fr / Rear / O/S / N/S / U/C / Rooftop or
Lum Sum: % 3 Val.: Yes or No  CA / REV / REP. / 24 HRS Vehicle: IN / OUT  Date: Person Contacted:  Date / Time Action / Instruction  TY ALG.  MV : 10714	Des. of Damages Fr / Rear / O/S / N/S / U/C / Rooftop or
Lum Sum: % 3 Val.: Yes or No  CA / REV / REP. / 24 HRS Vehicle: IN / OUT  Date: Person Contacted:  Date / Time Action / Instruction  T/ AlG.  MV: 10714  PV: 53.64	Des. of Damages Fr / Rear / O/S / N/S / U/C / Rooftop or
Lum Sum: % 3 Val.: Yes or No  CA / REV / REP. / 24 HRS Vehicle: IN / OUT  Date: Person Contacted:  Date / Time Action / Instruction  TY ALG.  MV : 10714	Des. of Damages Fr / Rear / O/S / N/S / U/C / Rooftop or
Lum Sum: % 3 Val.: Yes or No  CA / REV / REP. / 24 HRS Vehicle: IN / OUT  Date: Person Contacted:  Date / Time Action / Instruction  T/ AlG.  MV: 10714  PV: 53.64	Des. of Damages Fr / Rear / O/S / N/S / U/C / Rooftop or
Lum Sum: % 3 Val.: Yes or No  CA / REV / REP. / 24 HRS Vehicle: IN / OUT  Date: Person Contacted:  Date / Time Action / Instruction  T/ AlG.  MV: 10714  PV: 53.64	Des. of Damages Fr / Rear / O/S / N/S / U/C / Rooftop or
Lum Sum:  (A / REV / REP. / 24 HRS W)  Date:  Person Contacted:  Date / Time Action / Instruction  T(? All G).  MV: 10714  PV: 53.644.	Des. of Damages Fro / Rear / O/S / N/S / U/C / Rooftop or  The U/C / Chassis frame / Body Structure affected due to collision.
Lum Sum:  % 3 Val.: Yes or No  CA / REV / REP. / 24 HRS \ Vehicle: IN / OUT  Date:  Person Contacted:  Date / Time   Action / Instruction  T(? Alg.)  MV: 10714  PV: 53.6k  Nelt: \$3.4k.  Date/Time, File Pass to?  : Preli. Report	Des. of Damages Fro I Rear I O/S I N/S I U/C I Rooftop or  The U/C I Chassis frame I Body Structure affected due to collision.  Days Of Repair:
Lum Sum:  % 3 Val.: Yes or No  CA / REV / REP. / 24 HRS 1 Vehicle: IN / OUT  Date:  Person Contacted:  Date / Time   Action / Instruction  T? Al.G.  MV: 10714  PV: 53.6k  Nelt: \$3.4k.  Date/Time, File Pass Io?  : Preli. Report  1)	Des. of Damages Fri / Rear / O/S / N/S / U/C / Rooftop or  The U/C / Chassis frame / Body Structure affected due to collision.  Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:
Lum Sum:  (CA / REV / REP. / 24 HRS W)  Date:  Person Contacted:  Date / Time	Des. of Damages Fri / Rear / O/S / N/S / U/C / Rooftop or  The U/C / Chassis frame / Body Structure affected due to collision.  Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:
Lum Sum:  (CA / REV / REP. / 24 HRS W)  Date:  Person Contacted:  Date / Time	Des. of Damages Fri / Rear / O/S / N/S / U/C / Rooftop or  The U/C / Chassis frame / Body Structure affected due to collision.  Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:  Sitte Insp (\$ )S+RSSI
Lum Sum:  (CA / REV / REP. / 24 HRS W)  Date:  Person Contacted:  Date / Time	Des. of Damages Fro / Rear / O/S / N/S / U/C / Rooftop or  The U/C / Chassis frame / Body Structure affected due to collision.  Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:  S: Site Insp (\$

## > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Mehicle Owner Particulars	Singapore NDIC
Owner ID Type:	Singapore NRIC
Owner ID:	4684Z
Vehicle Details	SMA2436D
Vehicle No.:	
Vehicle to be Exported:	Yes
Intended Deregistration Date:	12 Jul 2019
Vehicle Make:	AUDI
Vehicle Model:	Q2 1.0 TFSI S TRONIC
Primary Colour:	Grey
Manufacturing Year:	2017
Engine No.:	CHZ646493
Chassis No.:	WAUZZZGA4JA058069
Maximum Power Output:	85.0 kW (113 bhp)
Open Market Value:	\$27,220.00
Original Registration Date:	31 May 2018
First Registration Date:	31 May 2018
Transfer Count:	0
Actual ARF Paid:	\$30,108.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	30 May 2028
PARF Rebate Amount:	\$22,581.00
Intended COE Rebate Details	
COE Expiry Date:	30 May 2028
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$38,830.00
COE Rebate Amount:	\$31,064.00
Total Rebate Amount:	\$53,645.00

The information contained herein is correct as at 12 Jul 2019

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