

INS. CASE OWNER: LOH CHEE HENG

CC4/AIG19014303/Uha3

LKK:
IDAC:

ASSIGNMENT

Surveyor: MARCUS

DOI: 16/08/2019

Date / Time: 16/08/2019

Registered in Merimen: 16/08/2019

Pre-assign / CCU / FTE



Insured Vehicle No. : SMJ 2236S

Claim No. : 8084555646SG

Name of Insured : SECK LING LING, MELISSA

Policy No. : 1900020109

Insured Tel No. : HP: +65-92785766

Make / Model :

Excess Sec II : S\$

D.O.A : 09/06/2019 11:45

Place of Accident : CTE BEFORE BUKIT TIMAH EXIT

Is driver the owner? (YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

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

Driver Tel No. :

(V/L: YES / NO)

Insured Liability : % Final ? Yes / No

FBE 3642C

INSRS:
WSP: BAN HOCK HIN
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date / Time	STAGE	DATE / PIC
FBE 3642C - X	Non-Reporting ltr (1st):	
SMJ 2236S - CC6/AIG19010141/Uhb3 ; DOA: 09/6/19	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:	
PRELIMINARY ADVICE Date/Time:	Post-Repair Photos:	
Sent By:	Others:	
FINALIZATION Date/Time:	Confirm with:	Confirm by:
Repair Cost: S\$	(days) Reduction: %	Email <input type="checkbox"/> Call <input type="checkbox"/>
FINAL SETTLEMENT Date/Time:	Confirm with:	Email <input type="checkbox"/> Call <input type="checkbox"/>
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 <input type="checkbox"/> LOU only <input type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/> [Tick only one]		
GIA/LTA Search S\$		1) Claim status: Normal/Reject/Private Settle
Medical: S\$		2) Report Format:
Disbursement: S\$	(e.g. Tow/ Independent)	3) Survey fee:
Legal Cost S\$		
Total: S\$	Global Sum S\$:	
FINAL PAYMENT Date/Time:	Confirm with:	Email <input type="checkbox"/> Call <input type="checkbox"/>
Payee 1: S\$	Name 1:	
Payee 2: (Strike if N.A.) S\$	Name 2:	
Payee 3: (Strike if N.A.) S\$	Name 3:	

(08/11/13) wef

REF:

ASS. REC. BY: Marcus

ASSIGNMENT

From:

Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

Bal. or Market Value:

IDAC Accident Rpt:

GIA / PR Seen:

Est. Repairs:

Lum Sum:

Consistent? : Yes or No

Consistent? : Yes or No

days Res.: Yes or No

% 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Date / Time

Action / Instruction

Vehicle: IN / OUT

Veh No:

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Colour

Sp. Reading

Eng/No:

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

R/Bal.

L/Bal.

D.O.A.

Rear

R/Bal.

L/Bal.

D.O.I.

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2)

☐ : Preli. Report

☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:

☐ : Site Insp (\$

☐ : Interview (\$

☐ : Tech. Invs (\$

☐ : Weekend (\$

) S + RS, SI

) Photos

) Others

TOTAL

Report Format :

Lump Sum / I.B.I.: (\$

Enquire Transfer Fee

Enquire Transfer Fee			
Vehicle Details			
Vehicle No. :	FBE3642C		
Vehicle Type :	P00 - Passenger Motorcycle/Autocycle/Moped		
Vehicle Attachment 1 :	No Attachment		
Vehicle Scheme :	Normal		
Vehicle Make :	SUZUKI		
Vehicle Model :	GSR400 M		
Chassis No. :	GK7DA103050		
Propellant :	Petrol		
Engine No. :	K719103084		
Engine Capacity :	398 cc		
Maximum Power Output :	-		
Maximum Laden Weight :	320 kg		
Unladen Weight :	210 kg		
Year Of Manufacture :	2008		
Original Registration Date :	12 Mar 2010		
Lifespan Expiry Date :	-		
COE Category :	D - Motorcycle		
Quota Premium :	\$1,001.00		
COE Expiry Date :	11 Mar 2020		
Road Tax Expiry Date :	11 Mar 2020		
Inspection Due Date :	11 Mar 2020		
Intended Transfer Date :	09 Jul 2019		
CO2 Emission :	-		
CO Emission :	-		
HC Emission :	-		
NOx Emission :	-		
PM Emission :	-		
Late renewal fee(s) will be imposed if road tax / lay-up has expired. Please use Enquire Road Tax Payable for fee(s) payable.			
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.			
Amount Payable			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
Total Amount Payable :			25.00

You may print this page for reference.

OK

Print

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Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	579I
Vehicle Details	
Vehicle No.:	FBE3642C
Vehicle to be Exported:	No
Intended Deregistration Date:	16 Aug 2019
Vehicle Make:	SUZUKI
Vehicle Model:	GSR400 M
Primary Colour:	Blue
Secondary Colour:	Silver
Manufacturing Year:	2008
Engine No.:	K719103084
Chassis No.:	GK7DA103050
Maximum Power Output:	-
Open Market Value:	\$10,629.00
Original Registration Date:	12 Mar 2010
First Registration Date:	12 Mar 2010
Transfer Count:	1
Actual ARF Paid:	\$1,595.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	11 Mar 2020
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$1,001.00
COE Rebate Amount:	\$56.00
Total Rebate Amount:	\$56.00

The information contained herein is correct as at 16 Aug 2019

OK