

Surveyor:

Store.

DOI:

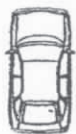
ASSIGNMENT

27/8/19

Date / Time : 21/08/2019

Registered in Merimen: -

Pre-assign / CCU / FTE



Insured Vehicle No. : FBM5098T

Claim No. : S9M01XS2

Name of Insured : PARAMESWARAN PRASHOBAN

Policy No. : VMX/P2223974

Insured Tel No. : HP: +65-83956113

Make / Model : YAMAHA FZN150

Excess Sec II :S\$

D.O.A : 13/08/2019 09:10

Place of Accident : SLE TWDS BKE

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

GZ 8820C

INSRS:
WSP: WENG KEE
Tel: MOTOR
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:INSRS:
WSP:
Tel:
Liability:
RMKS:

Date/ Time	GZ 8820C - X FBM 5098T - X		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)	<input type="checkbox"/>
			After call ltr to OI:	<input type="checkbox"/>
			Authorisation To Act:	<input type="checkbox"/>
			Release Voucher:	<input type="checkbox"/>
17/10/2020	10 days notice email TP on 12/09/2020. Till date no further development. Submit WP. Admin to close.		Final Repair Bill:	<input type="checkbox"/>
			Car Rental Invoice:	<input type="checkbox"/>
			Towing Invoice	<input type="checkbox"/>
			LTA / GIA :	<input type="checkbox"/>
			Medical Bill:	<input type="checkbox"/>
			PIR:	<input type="checkbox"/>
			Mandate/Reject Instruction:	<input type="checkbox"/>
			LOD	<input type="checkbox"/>
			Payment Breakdown Form:	<input type="checkbox"/>
PRELIMINARY ADVICE Date/Time: Sent By:			Post-Repair Photos:	<input type="checkbox"/>
			Others:	<input type="checkbox"/>
FINALIZATION Date/Time: Confirm with:			Confirm by:	
Repair Cost: L/S	S\$ 3350.00	(5 days) Reduction: 2289.82 % 40	Email <input type="checkbox"/>	Call <input type="checkbox"/>
FINAL SETTLEMENT Date/Time: Confirm with			Email <input type="checkbox"/> Call <input type="checkbox"/>	
Final Liability:	% 100	(Agreed / Assessed) BOLA S/N No. : 28G	If NO or B 28, Ass. Lia : 0%	
Repair Cost:	S\$			
Loss of Rental (LOR):	S\$	(days)		
Loss of Use (LOU):	S\$	(\$ x days)	C.C (OI 2ND)	
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\$			
Medical:	S\$		1) Claim status: Normal/Reject/Private Settle	
Disbursement:	S\$	(e.g. Tow/ Independent)	2) Report Format: WP	
Legal Cost	S\$		3) Survey fee: \$250.00	
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:		

08/11/19

Surveyor

Steve

REF: ASM (AXA)

PRS

ASSIGNMENT

From:

Date:

27.8.2019

Estimated Cost:

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

To Inspect Vehicle No: GZ 8820C

at Workshop m/s Weng Ka Motor

of Yishun Industrial Park A B1K 1019 Tel: 31-366

Insured:

Policy No.

Claims No.

Sum Insured:

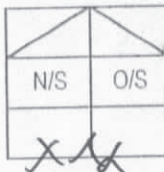
Excess:

(Client's Record)

Make of Veh: Acura 10-009-m

(Policy Condition)

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



Bal. or Market Value:

IDAC Accident Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS up

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: GZ 8820C

Yr Regn:

4/8/15

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

Truck / Trailer or

Make:

Nissan NV200

C.C.

1461

Colour:

Silver

A/C: Insured / Std / NI / NA

Sp. Reading:

149617

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

VSKYDAM 202 0093743

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:

175/70 R14C

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

TOYO / YOKO or

Front

Rear

R/Bal.

5

mm

R/Bal.

5

mm

L/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

13/8/19

D.O.I.

27/8/19

Survey held at

Weng Kee

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

Action / Instruction

MK 39K

Date/Time, File Pass to?

☐

Preli. Report

1)

Date/Time, File Return to?

☐

Final Report

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Report Format :

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

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Inquire PARF/COE Rebate for Registered Vehicle

The information contained herein is correct as at 27 Aug 2019

OK

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	963C
Vehicle Details	
Vehicle No.:	GZ8820C
Vehicle to be Exported:	Yes
Intended Deregistration Date:	21 Aug 2019
Vehicle Make:	NISSAN
Vehicle Model:	NV200 1.5L MT ABS AIRBAG 2WD 6DR EURO 5
Primary Colour:	Silver
Manufacturing Year:	2014
Engine No.:	K9KC400D054240
Chassis No.:	VSKYBAM20Z0093743
Maximum Power Output:	-
Open Market Value:	\$20,544.00
Original Registration Date:	04 Aug 2015
First Registration Date:	04 Aug 2015
Transfer Count:	0
Actual ARF Paid:	\$1,028.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	03 Aug 2025
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
PQP Paid:	\$40,783.00
COE Rebate Amount:	\$24,272.00
Total Rebate Amount:	\$24,272.00

The information contained herein is correct as at 21 Aug 2019

OK