

INS. CASE OWNER:

RICHARD ANG

CC4/ASM19015006/ K pa3

LKK:

IDAC: 133596

Surveyor:

Ksc

DOI:

ASSIGNMENT

979719

Date / Time : 26/08/2019

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SCY 6968B

Claim No. : S9M01XZ2

Name of Insured : TAY LING FONG

Policy No. : VPA/P1990614

Insured Tel No. : HP: +65-96285689

Make / Model : TOYOTA CAMRY-2.0 (A)

Excess Sec II : S\$ D.O.A : 21/08/2019 19:20

Place of Accident : BISHAN RD TOWARDS AMK

Is driver the owner? ( YES / NO ) Nature of Accident :

If NO, Driver Name / Age : LEE CHONG SIM

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

Driver Tel No. : +65-90034578 (V/L: YES / NO )

Insured Liability : % Final ? Yes / No

SGP 6876H

INSRS:  
WSP: LHMK  
Tel :  
Liability :  
RMKS:INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:

Date/ Time	STAGE		DATE / PIC
SGP 6876H - CC6/AIG13014984/Apa3q2; DOA:5/8/13	Non-Reporting ltr (1st):		
SCY 6968B - X	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:	Sent By:	
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\$		
Medical:	S\$		
Disbursement:	S\$	(e.g. Tow/ Independent )	
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:	

ASS. REC. BY:

REF: 1441Kenneth

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To inspect Vehicle No: \_\_\_\_\_

at Workshop m/s 1 dmk

of \_\_\_\_\_

Insured: \_\_\_\_\_

Policy No. \_\_\_\_\_

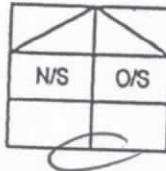
Claims No. \_\_\_\_\_

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(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: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: 02 days Res.: Yes or NoLum Sum: 1-B.1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SGP687614 Yr Regn: 11, 15

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

Truck / Trailer or WagonMake: Subaru Forester c.c. 1995Colour: M. P. White A/C: Insured / Std / NI / NASp. Reading: 78879 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: JF15J3KLSFG059631Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt or

Modl: NII / S/Rlm / STD / Rlm or

Tyre Size: F: 225/60R17

R: \_\_\_\_\_

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or

Front \_\_\_\_\_ Rear \_\_\_\_\_

R/Bal. 5 mm R/Bal. 5 mmL/Bal. 5 mm L/Bal. 5 mmD.O.A. 21/8/19 D.O.I. 9/9/19

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 Action / Instruction

1 File pass to

Date/Time, File Pass to?

☐ : Prell. Report☐ : Final Report

1)

Date/Time, File Return to?

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_  
\$ - RS. \$

Fines

Others

TOTAL

Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech Invs (\$)☐ : Weekend (\$)

Report Format :

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

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type: Singapore NRIC  
Owner ID: 779E

### Vehicle Details

Vehicle No.: SGP6876H  
Vehicle to be Exported: No  
Intended Deregistration Date: 22 Aug 2019  
Vehicle Make: SUBARU  
Vehicle Model: FORESTER 2.0I-L CVT AWD SR  
Primary Colour: White  
Manufacturing Year: 2015  
Engine No.: FB20Y084876  
Chassis No.: JF1SJ5KC5FG059631  
Maximum Power Output: 110.0 kW (147 bhp)  
Open Market Value: \$14,528.00  
Original Registration Date: 23 Nov 2015  
First Registration Date: 23 Nov 2015  
Transfer Count: 0  
Actual ARF Paid: \$14,528.00

### Intended PARF Rebate Details

PARF Eligibility: Yes  
PARF Eligibility Expiry Date: 22 Nov 2025  
PARF Rebate Amount: \$10,896.00

### Intended COE Rebate Details

COE Expiry Date: 22 Nov 2025  
COE Category: B - Car above 1600cc or 97kW (130bhp)  
COE Period(Years): 10  
QP Paid: \$57,501.00  
COE Rebate Amount: \$35,938.00  
**Total Rebate Amount: \$46,834.00**

The information contained herein is correct as at 22 Aug 2019

OK