5/5/20	10		

S\$

S\$ S\$

Payee 1:

Payee 2: (Strike if N.A.)
Payee 3: (Strike if N.A.)

Name 1:

Name 2: Name 3:

## CC4/FGI19015087/Aea3

LKK:
IDAC:

INS. CASE OWNER	t:	CC4/EG11901	508//Ae	as IDAC:	
Surveyor:	ADPAN	DOI: ASSIGNM	ENT	Date / Time : 26/08/2019	
	7			Registered in Merimen: 27/0	08/2019
Pre-assign / CCU	/ FTE				/
Insured Vehicle No	GBD 14R		Claim No.	: CDMCG1900148	15
Name of Insured			Policy No.	:	
Insured Tel No.	: HP:		Make / Model		
Excess Sec II :S\$		4: 22/08/2019 14:20	Place of Accid	LIP ROAD FROM SIN MING RO	)AD > UPP THOMS
		re of Accident :		ISOAD	
Is driver the owner		e of Accident .			T 1770 / 110
If NO, Driver Nan Driver Tel I		(V/L: YES / NO )	Ol GIA REPO	ORT: YES / NO; TP GIA REPOR' ity: % Final? Yes	
GBF 2740D	)				
INSRS: WSP: MG SOL Tel: Liability: RMKS:	LUTION INSRS: WSP: Tel: Liability: RMKS:		INSRS: WSP: Tel: Liability: RMKS:	INSRS: WSP: Tel: Liability RMKS:	y:
Date/ Time					
	GBF 2740D - X	GBD 14R -	- 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: Han	dler 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:		Post-Repair Photos:	
				Others:	
FINALIZATION	Date/Time:	Confirm with:		Confirm by:	
Repair Cost:	S\$ ( d	ays) Reduction:	%	Email	Call
FINAL SETTLEMENT	Date/Time: Confi	irm with		Email Call	
Final Liability:	% (Agreed / Asses	sed) BOLA S/N No.:		If NO or B 28, Ass. Lia:	
Repair Cost:	S\$				
Loss of Rental (LOR):		ays)			
Loss of Use (LOU):	The second secon	lays)			
Loss of Income (LOI):		lays)			
LOR only LOU only GIA/LTA Search	LOR + LOU LOR +	LOI [Tick only one]			
Medical:	S\$ S\$			Claim status: Normal/Reject/P	rivate Settle
		(e.g. Tow/ Independent )		Claim status: Normal/Reject/P     Report Format:	iivate settie
Disbursement: Legal Cost	S\$ S\$	(e.g. 10w/ independent )		3) Survey fee:	
Total:	12572	al Sum S\$:		productor and a second	
FINAL PAYMENT		irm with:		Email Call	
THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PE	Comm.				

## > Back to OneMotoring

Eng	uire	Trai	nsfer	Fee

nquire Transfer Fee				
Vehicle Details				
Vehicle No.:	GBF2740D	1		
Vehicle Type :	A50 - Goods (Closed) Van/Van Panel (Delivery)			
Vehicle Attachment 1:	No Attachment			
Vehicle Scheme :	Normal			
Vehicle Make:	TOYOTA			
Vehicle Model:	HIACE DX 3.0 AUTO			
Chassis No.:	KDH2010199169			
Propellant:	Diesel			
Engine No.:	1KD2624676			
Engine Capacity:	2982 cc			
Maximum Power Output:	-			
Maximum Laden Weight:	3235 kg			
Unladen Weight:	1780 kg			
Year Of Manufacture :	2016			
Original Registration Date :	26 Aug 2016			
Lifespan Expiry Date:	25 Aug 2036			
COE Category:	C - Goods Vehicle & Bus			
PQP Paid:	\$13,183.00			
COE Expiry Date :	25 Aug 2026			
Road Tax Expiry Date:	25 Aug 2020			
Inspection Due Date :	25 Aug 2020			
Intended Transfer Date :	27 Aug 2019			
CO2 Emission :	218.00 (g/km)			
CEV/VES Rebate Utilised Amount :	•			
CO Emission :				
HC Emission :				
NOx Emission :				
PM Emission:				
Late renewal fee(s) will be impos	sed if road tax / lay-up has expired. Please use Enqu	ire Road Tax Payable for fee(s) paya	able.	
	nt (if any), of a vehicle will follow the vehicle to the			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GS	
Transfer Foot	25.00	,	25.0	

Amount rayable	Amount Before GST	GST Amount	Amount After GST
	(S\$)	(S\$)	(S\$)
Transfer Fee :	25.00	-	25.00
Total Amount Payable :			25.00

This vehicle has a road tax Over Payment of \$14.00. This Over Payment may be used to offset Road Tax payable and Transfer Fees respectively, where applicable.

You may print this page for reference.

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