15/5/2010

INS. CASE OWNER: Loh Chee Heng | CC4/AIG19015388/Uka3 | LKK: IDAC:

ASSIGNMENT

Surveyor: MARCUS DOI: 03/09/2019 Date / Time : 30/08/2019

Registered in Merimen: 30/08/2019

Pre-assign / CCU / FTE

Insured Vehicle No. : SL 21B Claim No. : 5845350684SG

Name of Insured : TAY LIAN PHECK Policy No. : 1900083995

Insured Tel No. : HP: +65-96254788 Make / Model : MERCEDES-BENZ C180

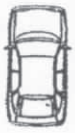
Excess Sec II :S$ D.O.A : 29/08/2019 15:05 Place of Accident : ORCHARD RD / HANDY RD

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**

SKB 8596D → → →



INSRS:
WSP: ABWIN SERVICE
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time			STAGE	DATE / PIC
	SKB 8596D - X	SL 21B - X	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)	☐	☐
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:		☐
Post-Repair Photos:	☐	☐
Others:	☐	☐

PRELIMINARY ADVICE	Date/Time:	Sent By:	
FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost:	S$	(days) Reduction: %	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time:	Confirm with	Email ☐ Call ☐
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 ☐ LOU only ☐	LOR + LOU ☐	LOR + LOI ☐ **[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:
Legal Cost	S$		3) Survey fee:
Total:	**S$**	**Global Sum S$:**	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
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 Marcus

REF: AIG

ASSIGNMENT

From: Date: 3.9.2019

Estimated Cost:

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

To Inspect Vehicle No: SKB 8596D

at Workshop m/s Abmin Servica

of NO 8 Kaki Bukit Ave 4 #07-48

Insured:

Policy No.

Claims No.

Sum Insured: Excess:

(Client's Record)

Make of Veh: 10.00a.m - 11.00a.m Owner waiting

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: 26

IDAC Accident Rport: 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 mvp' 4A20245

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SKB 8596D Yr Regn: 7/11

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or GAT

Make: Daihatsu materia c.c 1495

Colour Grey A/C: Insured / Std / NI / NA

Sp.Reading 218762 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: JDAM402500101505?

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: 195/55R15

R:

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.	29/8/19	D.O.I.	3/9/19

Survey held at

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

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

Date / Time	Action / Instruction

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2)

☐ : Preli. Report

☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Invs ($)

☐ : Weekend ($)

Report Format :

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

Survey Fee:

Transportation: ___S + RS, ___SI

Photos

Others

TOTAL

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	291B
Vehicle Details	
Vehicle No.:	SKB8596D
Vehicle to be Exported:	No
Intended Deregistration Date:	03 Sep 2019
Vehicle Make:	DAIHATSU
Vehicle Model:	MATERIA 1.5L AUTO ABS AIRBAG 2WD
Primary Colour:	Grey
Manufacturing Year:	2009
Engine No.:	2382686
Chassis No.:	JDAM402S001015057
Maximum Power Output:	76.0 kW (101 bhp)
Open Market Value:	$20,139.00
Original Registration Date:	01 Jul 2011
First Registration Date:	01 Jul 2011
Transfer Count:	0
Actual ARF Paid:	$20,139.00 10069
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	30 Jun 2021
PARF Rebate Amount:	$11,076.00
Intended COE Rebate Details	
COE Expiry Date:	30 Jun 2021
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
QP Paid:	$50,244.00
COE Rebate Amount:	$9,169.00
Total Rebate Amount:	**$20,245.00**

The information contained herein is correct as at 03 Sep 2019

OK