

ASSIGNMENT

Surveyor:

MARCUS

DOI: 03/09/2019

Date / Time : 03/09/2019

Registered in Merimen: 03/09/2019

Pre-assign / CCU / FTE



Insured Vehicle No. : SHD 4063B

Claim No. : _____

Name of Insured : COMFORT TRANSPORTATION PTE LTD

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : HYUNDAI IONIQ HYBRID

Excess Sec II :S\$ _____ D.O.A : 28/08/2019 21:05

Place of Accident : ROBINSON RD TOWARDS COLLYER QUAY

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

If NO, Driver Name / Age : LONG YAW NAN

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

Driver Tel No. : +65-81829563 (V/L: YES / NO)

Insured Liability : % Final ? Yes / No

SBC 8222J

INSRS:
WSP: Tick Hai Motor &
Tel: Welding Services
Liability :
RMKS:INSRS:
WSP:
Tel:
Liability :
RMKS:INSRS:
WSP:
Tel:
Liability :
RMKS:INSRS:
WSP:
Tel:
Liability :
RMKS:

| Date/ Time | | STAGE | DATE / PIC |
|---|---|------------------------------------|--|
| | SHD 4063B - CC4/AXA13001570/H1hf3y; DOA:21.1.13 | Non-Reporting ltr (1st): | |
| | SBC 8222J - NA/INC10014346/r; DOA: 20/7/10 | 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"/> |
| | | 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"/> |
| | | Post-Repair Photos: | <input type="checkbox"/> |
| | | Others: | <input type="checkbox"/> |
| 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) | 1) Claim status: Normal/Reject/Private Settle |
| Legal Cost | S\$ _____ | | 2) Report Format: |
| Total: | S\$ _____ | Global Sum S\$: | 3) Survey fee: |
| 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

ASS. REC. BY: Marcus

REF:

ASSIGNMENT

From: Estimated Cost:

Date:

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:

Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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

| | |
|-----|-----|
| | |
| N/S | O/S |
| | |

Bal. or Market Value:

IDAC Accident Rpt:

GIA / PR Seen:

Est. Repairs:

Lum Sum:

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Date / Time Action / Instruction

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2)

Report Format :

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

☐ : Preli. Report
☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

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

Survey Fee:

Transportation:

\$ + RS \$

Photos

Others

TOTAL

Veh No:

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

Truck / Trailer of

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 / QHTSU / PIR / SUMI /

TOYO / YOKO or

Front

R/Bal.

L/Bal.

D.O.A.

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.

SBC 8222 Yr Regn: 8/10

Make: Mer Benz E200 Chp.c 1796

Colour: S.W A/C: Insured / Std / NI / NA

Sp. Reading: 89635 T/Radio: Insured / Std / NI / NA

C/No: WDD2120482A221074

Steering: In order

Brake: In order

Modi: Nil

Tyre Size:

F:

R:

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

TOYO / YOKO or

Front

R/Bal.

L/Bal.

D.O.A.

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.

New Cars

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AVIVA

Mercedes-Benz e200

Price Range ▼

Depreciation ▼

2010 ▼

Vehicle Type ▼



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Mercedes-Benz E-Class E200 CGI

Overview

Financial

Insurance

Accessories

Similar

Research

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Map

| | | | |
|------------------------|--|------------------------|---|
| Price | \$48,800 | | |
| Depreciation ? | \$19,390 /yr View models with similar depre | Reg Date | 20-Oct-2010 (1yr 1mth 15days COE left) |
| Mileage | 56,000 km (6.3k /yr) | Manufactured ? | 2010 |
| Road Tax ? | \$974 /yr | Transmission | Auto |
| Dereg Value ? | \$34,627 as of today (change) | OMV ? | \$53,923 |
| COE ? | \$44,129 | ARF ? | \$53,923 |
| Engine Cap | 1,796 cc | Power | 135.0 kW (181 bhp) |
| Curb Weight ? | 1,615 kg | No. of Owners ? | 3 |
| Type of Vehicle | Luxury Sedan | | |

Features

View specs of the Mercedes-Benz E-Class Saloon (2009-2013)

Description

Super Low Mileage! Definitely The Best Choice For COE Renewal. Superb Original Interior Condition For It's Age. No Typical Peeling Buttons Issues. View To Believe!

Category

PARF Car, Low Mileage Car

Status

Available

Resources



Vehicle Evaluation

Afraid of lemons? Request to have this car evaluated professionally. Find out more

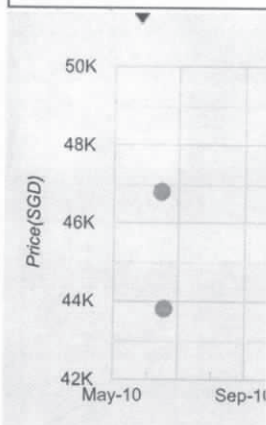


- Free

ket value of your existing car for free. Get started



Price Chart



Click on the point to view

Shortlist

Com

Report Error

M

Seller Information

> **Back to OneMotoring**

Enquire PARF/COE Rebate for Registered Vehicle

| | |
|-------------------------------------|--------------------|
| Vehicle Owner Particulars | |
| Owner ID Type: | Singapore NRIC |
| Owner ID: | 682B |
| Vehicle Details | |
| Vehicle No.: | SBC8222J |
| Vehicle to be Exported: | No |
| Intended Deregistration Date: | 03 Sep 2019 |
| Vehicle Make: | MERCEDES BENZ |
| Vehicle Model: | E 200CGI |
| Primary Colour: | Silver |
| Manufacturing Year: | 2010 |
| Engine No.: | 27186030065575 |
| Chassis No.: | WDD2120482A221074 |
| Maximum Power Output: | 135.0 kW (181 bhp) |
| Open Market Value: | \$53,923.00 |
| Original Registration Date: | 16 Aug 2010 |
| First Registration Date: | 16 Aug 2010 |
| Transfer Count: | 0 |
| Actual ARF Paid: | \$53,923.00 |
| Intended PARF Rebate Details | |
| PARF Eligibility: | Yes |
| PARF Eligibility Expiry Date: | 15 Aug 2020 |
| PARF Rebate Amount: | \$26,961.00 |
| Intended COE Rebate Details | |
| COE Expiry Date: | 15 Aug 2020 |
| COE Category: | E - Open Category |
| COE Period(Years): | 10 |
| QP Paid: | \$39,000.00 |
| COE Rebate Amount: | \$3,283.00 |
| Total Rebate Amount: | \$30,244.00 |

The information contained herein is correct as at 03 Sep 2019

OK