15/5/2010

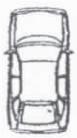
INS. CASE OWNER: DANIEL POOI | CC4/III19017514/Epa3 | LKK: IDAC:

ASSIGNMENT

Surveyor: STEVE DOI: 04/10/2019 Date / Time : 04/10/2019

Registered in Merimen: 04/10/2019

Pre-assign / CCU / FTE



Insured Vehicle No. : SH 6124U Claim No. : MCT19090747

Name of Insured : COMFORT TRANSPORTATION PTE LTD Policy No. : MCOM0015

Insured Tel No. : _____ HP: _____ Make / Model : HYUNDAI IONIQ HYBRID

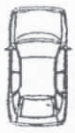
Excess Sec II :S$ _____ D.O.A : 29/09/2019 15:10 Place of Accident : LUTHERAN ROAD X JUNCTION OF KING RD

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

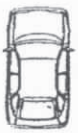
If **NO**, Driver Name / Age : V N ARASAKUMAR OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : +65-98216776 (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SLG 5358G → _____ → _____ → _____

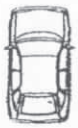


INSRS:
WSP: VANTAGE
Tel : AUTOMOTIVE /
Liability :REGENT
RMKS: MOTORS



INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	
	SLG 5358G - CS/GAI18015682/R1vd3e2; DOA: 23/8/18
	SH 6124U - CC3/III16010606/Keg3q2; DOA: 04/06/19
	- NS/INC13006718/H1tn; DOA: 9/4/13
	- CS/TMI13000059/H1y1n; DOA: 29/12/12

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)	☐	☐
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:	

ASS. REC. BY: Steve | REF: TJ

ASSIGNMENT

From: | Date: 4.10.2019

Estimated Cost:

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

To Inspect Vehicle No: SLG 5358G

at Workshop m/s Vantage Automotive

of 305 Alexandra Road

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 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

Vehicle: IN / OUT

Date: | Person Contacted:

Veh No: SLG 5358G | Yr Regn: 4/10/16

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

Make: Ford Focus | c.c 999

Colour Silver | A/C: Insured / Std / NI / NA

Sp.Reading 24829 | T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: WF04XXGCC4GR44473

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi : Nil / S/Rim / STD A/Rim or

Tyre Size: F: 205/55R16

R: "

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

Front		Rear	
R/Bal.	7 mm	R/Bal.	7 mm
L/Bal.	7 mm	L/Bal.	7 mm
D.O.A.	29/9/19	D.O.I.	4/10/19

Survey held at Vantage

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
	MV - 64000 4/10/19 Infra Simon 18K repair limit.
	PV - 45475
	NV - 18,525

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:	429J
Vehicle Details	
Vehicle No.:	SLG5358G
Vehicle to be Exported:	No
Intended Deregistration Date:	04 Oct 2019
Vehicle Make:	FORD
Vehicle Model:	FOCUS 4DR TITANIUM 1.0 GTDI S/S
Primary Colour:	Silver
Manufacturing Year:	2016
Engine No.:	GR44473
Chassis No.:	WF04XXGCC4GR44473
Maximum Power Output:	92.0 kW (123 bhp)
Open Market Value:	$18,988.00
Original Registration Date:	04 Oct 2016
First Registration Date:	04 Oct 2016
Transfer Count:	0
Actual ARF Paid:	$13,988.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	03 Oct 2026
PARF Rebate Amount:	$10,491.00
Intended COE Rebate Details	
COE Expiry Date:	03 Oct 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	$50,000.00
COE Rebate Amount:	$34,984.00
Total Rebate Amount:	**$45,475.00**

The information contained herein is correct as at 04 Oct 2019

OK