15/5/2010

INS. CASE OWNER: CHAN Kian Chuan 68805444

CC4/ASM19018550/Ega3

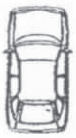
LKK:
IDAC: 142918

ASSIGNMENT

Surveyor: STEVE DOI: 18/10/2019 Date / Time : 18/10/2019

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : SML1821Z Claim No. : S9M0241T

Name of Insured : KOH TAT JUN KENNETH Policy No. : P2286730

Insured Tel No. : HP: +65-91118459 Make / Model : HYUNDAI AVANTE

Excess Sec II :S$ D.O.A : 16/10/2019 14:05 Place of Accident : VIVO CITY CARPARK B1

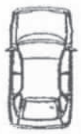
Is driver the owner? (YES / NO) Nature of Accident :

If **NO**, Driver Name / Age : HENG XUE-LI OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : +65-93272077 (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SMC 9022H → → →

INSRS:
WSP: RAAIM CAR BODYWORKS
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SMC 9022H - X SML 1821Z - 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:	

Surveyor Steve | REF: ASM (AXA)

ASSIGNMENT

From: Date:

Estimated Cost:

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
	X

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: SMC 9022H Yr Regn: 27/7/18

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

Make: Hyundai Elantra c.c 1591

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

Sp.Reading 17189 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: KMHD84ICMJU716984

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl : NIl / S/Rim / STD A/Rim or

Tyre Size: F: 195/65R15

R: "

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

Front		Rear	
R/Bal.	5 mm	R/Bal.	5 mm
L/Bal.	5 mm	L/Bal.	5 mm
D.O.A.	16/10/19	D.O.I.	18/10/19

Survey held at RAAIM

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 - 68K

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2)

☐ : Proll. Report

☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation: S + RS SI

Photos

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:	870C
Vehicle Details	
Vehicle No.:	SMC9022H
Vehicle to be Exported:	No
Intended Deregistration Date:	18 Oct 2019
Vehicle Make:	HYUNDAI
Vehicle Model:	ELANTRA AD 1.6 GLS AT (AMS)
Primary Colour:	Silver
Manufacturing Year:	2018
Engine No.:	G4FGJU221450
Chassis No.:	KMHD841CMJU716984
Maximum Power Output:	93.8 kW (125 bhp)
Open Market Value:	$10,842.00
Original Registration Date:	27 Jul 2018
First Registration Date:	27 Jul 2018
Transfer Count:	0
Actual ARF Paid:	$10,842.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	26 Jul 2028
PARF Rebate Amount:	$8,131.00
Intended COE Rebate Details	
COE Expiry Date:	26 Jul 2028
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	$32,699.00
COE Rebate Amount:	$28,681.00
Total Rebate Amount:	**$36,812.00**

The information contained herein is correct as at 18 Oct 2019

OK