15/5/2010

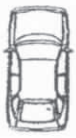
INS. CASE OWNER: Chan Kian Meng | CC4/AIG19019515/Uha3 | LKK: | IDAC:

## ASSIGNMENT

Surveyor: MARCUS DOI: 05.11.2019 Date / Time : 04.11.2019

Registered in Merimen: 05.11.2019

**Pre-assign / CCU / FTE**



Insured Vehicle No. : SGG 221J Claim No. : 7576264442SG

Name of Insured : LO SHYE RU Policy No. : 2100427460

Insured Tel No. : HP: Make / Model : INFINITI Q50 PREMIUM

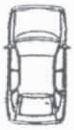
**Excess Sec II :S$** D.O.A : 02/11/2019 17:00 Place of Accident : PIE (TOWARDS TUAS) BEFORE STEVENS ROAD EXIT

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

If **NO**, Driver Name / Age : LO RACHAEL PIK YI OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : +65-92322810 (V/L: YES / NO ) Insured Liability : % **Final ? Yes / No**

SDL 9000E → → →



INSRS:
WSP: ZOOM AUTOWERKS
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

| Date/ Time | |
|---|---|
| | SDL 9000E - CC6/AIG12006732/Usa3y; DOA:02.04.12 |
| | SGG 221J - CC4/AIG17023596/T1pb3q2; DOA:9.12.17 |

| 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:

REF: MG

# ASSIGNMENT

From: Date: 05/11/19

Estimated Cost:

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

To Inspect Vehicle No: SDL 9000E

at Workshop m/s ZOOM AUTOWORKS

of Blk 15 Kaki Bukit Rd 4 Bartley

Insured: BIZ Centre #01-53

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

4472

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SDL9000E Yr Regn: 10,18

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

Make: Toyota Vellfire c.c 2493

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

Sp.Reading 19018 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: AGH30018447 8

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: 235/50 R18

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. | 2/11/19 | D.O.I. | 5/11/19 |

Survey held at

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

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

| Date / Time | Action / Instruction |
|---|---|
| | LTA 76397 |

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: | 447Z |
| **Vehicle Details** | |
| Vehicle No.: | SDL9000E |
| Vehicle to be Exported: | No |
| Intended Deregistration Date: | 05 Nov 2019 |
| Vehicle Make: | TOYOTA |
| Vehicle Model: | VELLFIRE 7-SEATER 2.5 ZG CVT |
| Primary Colour: | White |
| Manufacturing Year: | 2018 |
| Engine No.: | 2ARJ071492 |
| Chassis No.: | AGH300184418 |
| Maximum Power Output: | 134.0 kW (179 bhp) |
| Open Market Value: | $51,479.00 |
| Original Registration Date: | 05 Oct 2018 |
| First Registration Date: | 05 Oct 2018 |
| Transfer Count: | 0 |
| Actual ARF Paid: | $64,663.00 |
| **Intended PARF Rebate Details** | |
| PARF Eligibility: | Yes |
| PARF Eligibility Expiry Date: | 04 Oct 2028 |
| PARF Rebate Amount: | $48,497.00 |
| **Intended COE Rebate Details** | |
| COE Expiry Date: | 04 Oct 2028 |
| COE Category: | B - Car above 1600cc or 97kW (130bhp) |
| COE Period(Years): | 10 |
| QP Paid: | $31,301.00 |
| COE Rebate Amount: | $27,900.00 |
| **Total Rebate Amount:** | **$76,397.00** |

The information contained herein is correct as at 05 Nov 2019

OK