5			

INS. CASE OWNER:

LALITHA

CC4/III19020799/Qpa3

LKK: IDAC:

and a major think had				-
ACCI		ATR.	THE TOTAL	NT TI
ASSI	U.	ATA.	LE.	1.1

			A MED AD IN CO. E. LIKE SHAPE
Surveyor:	OSP	DOI:	25/11/2019

Date / Time: 25/11/2019

Registered in Merimen: 25/11/2019

Pre-assign / CCU / FTE

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K.	_,,,,
NH-	-7//

SKX 3178U Insured Vehicle No.

Claim No.

MFL2019D0001496

COMFORTDELGRO RENT-A-CAR PTE LTD Policy No.

D18MFL0003414

Name of Insured Insured Tel No.

NISSAN SYLPHY-1.6 (A)

Excess Sec II :S\$

D.O.A: 21/11/2019 19:15

HP:

Make / Model : Place of Accident:

OPHIR ROAD TOWARDS ECP DIRECTION

Is driver the owner?

(YES / NO)

Nature of Accident:

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

If NO, Driver Name / Age: NG CHIN TECK Driver Tel No.:

+65-97893564

(V/L: YES / NO)

Insured Liability: Final? Yes/No

SHC 4555D



INSRS: WSP: SMRT, WL Tel:

Liability: RMKS:



INSRS: WSP: Tel:

Liability:

RMKS:

INSRS: WSP: Tel: Liability: RMKS:



INSRS: WSP: Tel: Liability: RMKS:

Date/ Time		
	SHC 4555D - NS/INC19015524/Esf3s2; DOA: 30.8.19	STAGE DATE / PIC
	- CC3/CAI15002383/K1wa3n2; DOA: 4.2.15	Non-Reporting ltr (1st):
	SKX 3178U - X	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 Itr (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:
RELIMINARY ADVICE	Date/Time: Sent By:	Post-Repair Photos:
	*	Others:
INALIZATION	Date/Time: Confirm with:	Confirm by:
epair Cost:	S\$ (days) Reduction: %	Email Call
INAL SETTLEMENT	Date/Time: Confirm with	Email Call
inal Liability:	% (Agreed / Assessed) BOLA S/N No. :	If NO or B 28, Ass. Lia:
epair Cost:	S\$	2110 01 2 20,11111 2221
oss of Rental (LOR):	S\$ (days)	
oss of Use (LOU):	S\$ (\$ x days)	
oss of Income (LOI):	S\$ (\$ x days)	
OR only LOU only		
IA/LTA Search	S\$	
ledical:	S\$	1) Claim status: Normal/Reject/Private Settle
isbursement:	S\$ (e.g. Tow/ Independent)	2) Report Format:
egal Cost	S\$	3) Survey fee:
otal:	S\$ Global Sum S\$:	Tax annual variation
INAL PAYMENT	Date/Time: Confirm with:	Email Call
		Zinini Zinini
ayee I:	S\$ Name 1:	
ayee 2: (Strike if N.A.) ayee 3: (Strike if N.A.)	S\$ Name 2: S\$ Name 3:	

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EF:	-	M	

10399

ASSIGNMENT

From: Date: 25/11/19	Veh No: 5HC 4555D	Yr Regn: 16/07/2014.
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lo	rry (Tax) / Prime Mover /
OD (TP)WS/TP RES/OD RES/EVA/INV/MV	Truck / Trailer or	
To Inspect Vehicle No: SHC 4555D	Make: Toyota Prius	c.c 1796
at Workshop m/s SMPT	colour Maroun	A/C: Insured / Std / NI / NA
of swoodlands Depot	Sp.Reading 77/795	T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:	
Policy No.	C/No: JIDKN36450	55747165
Claims No.	Gen. Cond: Good (Fair) Poor / Burnt	
Sum Insured: Excess:	Steering: Ihorder Jammed / Leaked	/ Burnt or
(Client's Record)	Brake: Inorder/ Jammed / Leaked	/ Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim o	
	Tyre Size: F: 195/	65 RI5
(Policy Condition)	R: 195/	65 RIS
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA	/ MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO I YOKO or West	ake
Bal. or Market Value:	Front	Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 5 mm	R/Bal. 5 mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. 5 mm	L/Bal. 5 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 21/11/2019.	D.O.I. 25/11/19.
Lum Sum: % 3 Val.: Yes or No		SMRT.
CA / REV / REP. / 24 HRS	Des. of Damages : Frt (Rear) O/S	/ N/S / U/C / Rooftop or
Vehicle: IN / O Date: Person Contacted:		ly Structure affected due to collision.
Date / Time Action / Instruction		<i>T</i> 2
		17.
		TAX/11/19/2095
		SKX 31784 SMK 99134.
		SMK 9913 U.
Date/Time, File Pass to? : Prell. Report	Days Of Repair:	
: Final Report	Resurvey No. of Trip:	Survey Fee:
Date/Time, File Return to?	Emend	Transportation:
2) Add I	Fee: Site Insp (\$)s+Rs,si
	: Interview (\$) Photos
Report Format :	: Tech. Invs (\$) Others
Lump Sum / LBJ: (\$:Weekend (\$	
		TOTAL

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID: Vehicle Details	369K
Vehicle No.:	SHC4555D
Vehicle to be Exported:	No
Intended Deregistration Date:	26 Nov 2019
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS TAXI (SMRT)
Primary Colour:	Maroon
Manufacturing Year:	2014
Engine No.:	2ZR6099033
Chassis No.:	JTDKN36U505747165
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$32,920.00
Original Registration Date:	16 Jul 2014
First Registration Date:	16 Jul 2014
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$8,088.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	15 Jul 2022
PARF Rebate Amount: Intended COE Rebate Details	\$5,661.00
COE Expiry Date:	15 Jul 2022
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$53,269.00
COE Rebate Amount:	\$17,543.00
Total Rebate Amount: Message	\$23,204.00

The information contained herein is correct as at 26 Nov 2019

vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

OK