Surveyor:

INS. CASE OWNER:

CC6/III19021158/Apa3

- 1	LK	K
- 1		
- 1	ITY	

ASSIGNMENT

DOI: 27.11.2019 **ADRIAN**

Date / Time : 27.11.2019

30.11.2019 Registered in Merimen:

Pre-assign /	CCU/	FTF

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B	n=	=	n

SHC 8045H Claim No. Insured Vehicle No.

COMFORT TRANSPORTATION PTE LTD

Policy No.

MCOM0015

Insured Tel No. Excess Sec II :S\$

Name of Insured

D.O.A: 23.11.2019

MERCEDES-BENZ Make / Model :

Is driver the owner?

Nature of Accident: (YES / NO)

+65-83147575 (V/L: YES / NO)

TELOK BLANGAH CRESCENT

If NO, Driver Name / Age: Driver Tel No.:

PHUA KWEE WAH

Insured Liability:

Place of Accident:

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO Final? Yes/No

SGH 7228P



INSRS: WSP: CHIN MENG Tel: Liability: RMKS:



INSRS: WSP: Tel: Liability: RMKS:



INSRS: WSP: Tel: Liability: RMKS:



INSRS: WSP: Tel: Liability: RMKS:

Date/ Time				
	SHC 8045H - CC3/CT	119001454/K1eb3n2; DOA: 20.1.19	STAGE	DATE / PIC
	- CC3/AI	G17015084/K1eb3q2; DOA: 02.08.17	Non-Reporting ltr (1st):	
	SGH 7228P - CS/FCI1	4002291/Uqm3k3; DOA: 04.02.14	Non-Reporting ltr (2nd):	
			Non-Reporting ltr (Final):	
			Notification ltr (if non-pickup):	
			Call OI:	
			After call ltr to OI: Documentation Check List: Har	ndler Typist
			Notification ltr (if non-pickup)	idier Typist
			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:	
PRELIMINARY ADVICE	Date/Time:	Sent By:	Post-Repair Photos:	
			Others:	
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 / A	ssessed) BOLA S/N No. :	If NO or B 28, Ass. Lia:	
Repair Cost:	SS			
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 LO	R + LOI [Tick only one]		
GIA/LTA Search	S\$			
Madient.	S\$		1) Claim status: Normal/Reject/F	rivate Settle
viedicai:			2) Report Format:	
	S\$	(e.g. Tow/ Independent)	2) Report i ormat.	
Disbursement:	SS SS	(e.g. Tow/ Independent)	3) Survey fee:	
Disbursement: Legal Cost	S\$	(e.g. Tow/ Independent)		
Medical: Disbursement: Legal Cost Total: FINAL PAYMENT	S\$ C			
Disbursement: Legal Cost Total:	S\$ S\$ Date/Time:	Global Sum S\$:	3) Survey fee:	
Disbursement: Legal Cost Total: FINAL PAYMENT	SS S\$ C	Clobal Sum S\$:	3) Survey fee:	

ASSIGNMENT

From: Date:	Veh No: SG1+7228P Yr Regn: 20	15 August
Estimated Cost:	Type M.Car') M.Cycle / Bus / Van / Lorry / Taxi / Prime M	lover/
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or	
To Inspect Vehicle No:	Make: Nisson Sylphy. c.c	1598
at Workshop m/s	Make: Nissan Sylphy. c.c Colour Bronze . A/C: Insured	/Std/NI/NA
of	Sp.Reading 62530 T/Radio: Insured	/ Std / NI / NA
Insured:	Eng/No:	
Policy No.	C/No: MNTBBAB17200245	13
Claims No.	Gen. Cond: 800d) Fair / Poor / Burnt	
Sum Insured: Excess:	Steering: Inorde / Jammed / Leaked / Burnt or	
(Client's Record)	Brake: Ingger / Jammed / Leaked / Burnt or	
Make of Veh:	Modi: Nil /S/Rim/ STD A/Rim or	
CHECK COMES TO THE	Tyre Size: F: 195/60R16.	
(Policy Condition)	R: 195/60 PUb.	
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 / YOKO or	
Bal. or Market Value:	Front Rear	
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 06 mm R/Bal. 06	mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 06 mm L/Bal. 0.4	1
Est. Repairs: days Res.: Yes or No	D.O.A. D.O.I. 27	11/15
Lum Sum: % 3 Val.: Yes or No	Survey held at Chi'n Meny	
CA / REV / REP. / 24 HRS Vehicle: IN / OUT	Des. of Damages : Frt / Rear / O/S / N/S (VIC) / Roo	ftop or
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected	I due to collision.
Date / Time Action / Instruction		
TP /11		
M. C. I.		
MV: 52K PV: 45.41C		
Nett. 6.6K.		
7100		
Date/Time, File Pass to? : Preli. Report	Days Of Repair:	
i) : Final Report	Resurvey No. of Trip: Survey Fee:	
Date/Time, File Return to?	Transportation:	
2) Add Fee	: Site Insp (\$)	
the remaining of the section of the	: Interview (\$) Photos	
Report Format:	: Tech. Invs (\$) Others	
Lump Sum / LBJ: (\$:Weekend (\$)	
	TOTAL	

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	647F
Vehicle Details	
Vehicle No.:	SGH7228P
Vehicle to be Exported:	Yes
Intended Deregistration Date:	27 Nov 2019
Vehicle Make:	NISSAN
Vehicle Model:	SYLPHY 1.6 CVT ABS D/AIRBAG 2WD 4DR
Primary Colour:	Grey
Manufacturing Year:	2015
Engine No.:	HR16972648B
Chassis No.:	MNTBBAB17Z0024513
Maximum Power Output:	85.0 kW (113 bhp)
Open Market Value:	\$16,439.00
Original Registration Date:	25 Aug 2015
First Registration Date:	25 Aug 2015
Transfer Count:	0
Actual ARF Paid:	\$16,439.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	24 Aug 2025
PARF Rebate Amount:	\$12,329.00
Intended COF Rebate Details	
COE Expiry Date:	24 Aug 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$57,498.00
COE Rebate Amount:	\$33,014.00
Total Rebate Amount:	\$45,343.00

The information contained herein is correct as at 27 Nov 2019

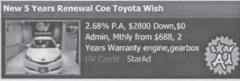
20 ▼ results/page

Good music must jio 🕦

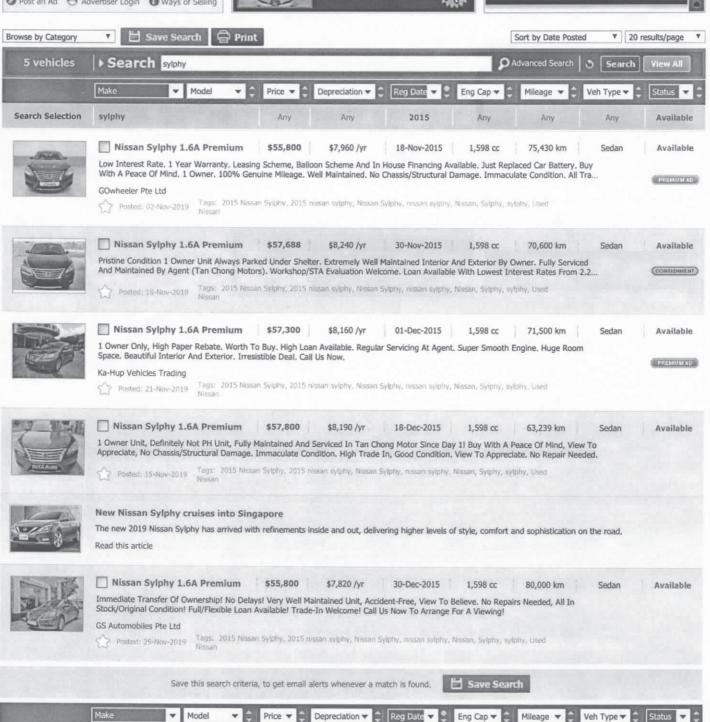


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