15/5/2010

INS. CASE OWNER: CC4/FCI19021945/Uka3

LKK:

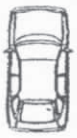
IDAC:

## ASSIGNMENT

Surveyor: MARCUS DOI: 12/12/2019 Date / Time : 12/12/2019

Registered in Merimen:

**Pre-assign / CCU / FTE**



Insured Vehicle No. : SHC 3076B Claim No. : D19007667MFSH

Name of Insured : COMFORT TRANSPORTATION PTE LTD Policy No. : D-19092580MFSH

Insured Tel No. : HP: Make / Model : MERCEDES-BENZ E220

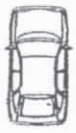
**Excess Sec II :S$** D.O.A : 03/12/2019 06:00 Place of Accident : AIRPORT BLVD >TERMINAL 2

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

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

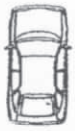
Driver Tel No. : (V/L: YES / NO ) Insured Liability : % **Final ? Yes / No**

FBE 4950G → → →



INSRS:
WSP: EROFIA MOTOR
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

| Date/ Time | |
|---|---|
| | FBE 4950G - X |
| | SHC 3076B - NS/INC17019921/M1qbe2; DOA: 15.10.17 |
| | - NA/INC13009012/m2; DOA: 16.5.13 |

| 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: | |

(08/11/13) wef

ASS. REC. BY: Marcus

REF: Za/ 7445

# ASSIGNMENT

From: Date:

Estimated Cost:

OD / TPFTWS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: FSE 4950G

at Workshop m/s Enfu

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 |
|---|---|
| | |

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**

Date: Person Contacted: Vehicle: **IN / OUT**

Veh No: FSE 4950G Yr Regn: 11/5 10

Type: **M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime/Mover /**

**Truck / Trailer** or

Make: Honda ANF125 c.c 125

Colour Black A/C: **Insured / Std / NI / NA**

Sp.Reading 48500 T/Radio: **Insured / Std / NI / NA**

Eng/No:

C/No: NF125MME5031272

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: 70/90-17

R: 80/90-17 metrele

**BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /**

**TOYO / YOKO** or

| Front | | Rear | |
|---|---|---|---|
| R/Bal. | 6 mm | R/Bal. | 6 mm |
| L/Bal. | mm | L/Bal. | mm |
| D.O.A. | 3/12/19 | D.O.I. | 1/12/19 |

Survey held at

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

N/S Body

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

| Date / Time | Action / Instruction |
|---|---|
| | COE 15-5-2020 Sinh. HTASI |

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: | 735Z |
| **Vehicle Details** | |
| Vehicle No.: | FBE4950G |
| Vehicle to be Exported: | No |
| Intended Deregistration Date: | 12 Dec 2019 |
| Vehicle Make: | HONDA |
| Vehicle Model: | ANF125MSS A |
| Primary Colour: | Black |
| Manufacturing Year: | 2010 |
| Engine No.: | NF125MME5001272 |
| Chassis No.: | NF125MM5001272 |
| Maximum Power Output: | - |
| Open Market Value: | $1,692.00 |
| Original Registration Date: | 11 May 2010 |
| First Registration Date: | 11 May 2010 |
| Transfer Count: | 5 |
| Actual ARF Paid: | $254.00 |
| **Intended PARF Rebate Details** | |
| PARF Eligibility: | No |
| PARF Eligibility Expiry Date: | - |
| PARF Rebate Amount: | $0.00 |
| **Intended COE Rebate Details** | |
| COE Expiry Date: | 10 May 2020 |
| COE Category: | D - Motorcycle |
| COE Period(Years): | 10 |
| QP Paid: | $1,252.00 |
| COE Rebate Amount: | $51.00 |
| **Total Rebate Amount:** | **$51.00** |

The information contained herein is correct as at 12 Dec 2019

OK