

INS. CASE OWNER: **ANG Richard**

CC4/ASM19022795/Gga3

LKK:

IDAC: **153342****ASSIGNMENT**Surveyor: **XGQ**DOI: **27/12/2019**Date / Time: **26.12.2019**

Registered in Merimen: _____

Pre-assign / CCU / FTE

Insured Vehicle No. : **SKR 3329H**Claim No. : **S9M02B27**Name of Insured : **XIAO LIMEI**Policy No. : **P1707376**

Insured Tel No. : _____ HP: _____

Make / Model : **BMW 218I**Excess Sec II : \$S _____ D.O.A : **22/12/2019 18:20**Place of Accident : **RAFFLES CITY SHOPPING CENTRE BASEMENT CARPARK**Is driver the owner? (YES / **NO**) Nature of Accident : _____If NO, Driver Name / Age : **CHEN XIGUANG**OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NODriver Tel No. : **+65-98113799** (V/L: YES / NO)

Insured Liability : _____ % Final ? Yes / No

SLC 960XINSRS:
WSP: **Tony Automotive**
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SKR3329H - X	SLC 960CX - X	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			
Disbursement:	\$S	(e.g. Tow/ Independent)	1) Claim status: Normal/Reject/Private Settle	
Legal Cost	\$S			2) Report Format:
Total:	\$S	Global Sum \$S:	3) Survey fee:	
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:		

GRL

AXA

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Tony Auto

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.Bal. or Market Value: \$48K

IDAC Accident Rpt: _____ Consistent?: Yes or No

GIA / PR Seen: _____ Consistent?: Yes or No

Est. Repairs: 4 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SLC960X Yr Regn: 29 Apr 2016Type: M Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Mazda 2 C.C. 1496Colour: Silver A/C: Insured / Std / NI / NASp. Reading: 84142 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: MM6DL2SAA6W191677Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD / A/Rim or

Tyre Size: F: 185/65R15R: 11

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

TOYO / YOKO or

Front

Rear

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. _____ D.O.I. 27-12-19Survey held at W/S 2830pm

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

\$2600

Date/Time, File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)

Survey Fee: _____

Transportation: _____

S + RS. SI

Photos

Others

TOTAL

Report Format: _____

Lump Sum / L&L: _____

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	597Z
Vehicle No.:	SLC960X
Vehicle to be Exported:	No
Intended Deregistration Date:	29 Dec 2019
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA2 SEDAN 1.5L SP.6EAT
Primary Colour:	Silver
Manufacturing Year:	2016
Engine No.:	P520345654
Chassis No.:	MM6DL2SAAGW191677
Maximum Power Output:	85.0 kW (113 bhp)
Open Market Value:	\$14,364.00
Original Registration Date:	29 Apr 2016
First Registration Date:	29 Apr 2016
Transfer Count:	1
Actual ARF Paid:	\$9,364.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	28 Apr 2026
PARF Rebate Amount:	\$7,023.00
COE Expiry Date:	28 Apr 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$47,300.00
COE Rebate Amount:	\$29,955.00
Total Rebate Amount:	\$36,978.00

The information contained herein is correct as at 29 Dec 2019

OK