

ASSIGNMENT

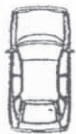
Surveyor:

STEVE

DOI: 27/12/2019

Date / Time : 27/12/2019

Registered in Merimen: 27/12/2019

Pre-assign / CCU / FTE

Insured Vehicle No. : SGX 3007C

Claim No. : 2331994870SG

Name of Insured : Said Bin Ahmad

Policy No. : 2100425864

Insured Tel No. : HP: 96695171

Make / Model :

Excess Sec II :S\$

D.O.A : 23/12/2019 17:55

Place of Accident : BEDOK NORTH AVE 3

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

SLJ 7016P

INSRS:
WSP: PREMIUM

Tel :

Liability :

RMKS:

INSRS:
WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time	STAGE	DATE / PIC
	SLJ 7016P - X	
	SGX 3007C - CC6/AIG15009155/Aua3q2; DOA: 29.5.15	
06/01/2020	OINR. To send out first letter. File pass to Su Li.	
	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)	<input type="checkbox"/>
	After call ltr to OI:	<input type="checkbox"/>
	Authorisation To Act:	<input type="checkbox"/>
	Release Voucher:	<input type="checkbox"/>
	Final Repair Bill:	<input type="checkbox"/>
	Car Rental Invoice:	<input type="checkbox"/>
	Towing Invoice	<input type="checkbox"/>
	LTA / GIA :	<input type="checkbox"/>
	Medical Bill:	<input type="checkbox"/>
	PIR:	<input type="checkbox"/>
	Mandate/Reject Instruction:	<input type="checkbox"/>
	LOD	<input type="checkbox"/>
	Payment Breakdown Form:	<input type="checkbox"/>
	Post-Repair Photos:	<input type="checkbox"/>
	Others:	<input type="checkbox"/>
PRELIMINARY ADVICE Date/Time:	Sent By:	
FINALIZATION Date/Time:	Confirm with:	Confirm by:
Repair Cost: S\$	(days) Reduction: %	Email <input type="checkbox"/> Call <input type="checkbox"/>
FINAL SETTLEMENT Date/Time:	Confirm with	Email <input type="checkbox"/> Call <input type="checkbox"/>
Final Liability: S\$	(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 <input type="checkbox"/> LOU only <input type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/>	[Tick only one]	
GIA/LTA Search	S\$	
Medical:	S\$	
Disbursement:	S\$ (e.g. Tow/ Independent)	
Legal Cost	S\$	
Total: S\$	Global Sum S\$:	
FINAL PAYMENT Date/Time:	Confirm with:	Email <input type="checkbox"/> Call <input type="checkbox"/>
Payee 1: S\$	Name 1:	
Payee 2: (Strike if N.A.) S\$	Name 2:	
Payee 3: (Strike if N.A.) S\$	Name 3:	

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	977H
Vehicle Details	
Vehicle No.:	SLJ7016P
Vehicle to be Exported:	No
Intended Deregistration Date:	27 Dec 2019
Vehicle Make:	AUDI
Vehicle Model:	A3 SEDAN 1.0 TFSI S TRONIC (LED)
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	CHZ138878
Chassis No.:	WAUZZZ8VXH1013682
Maximum Power Output:	85.0 kW (113 bhp)
Open Market Value:	\$24,581.00
Original Registration Date:	21 Dec 2016
First Registration Date:	21 Dec 2016
Transfer Count:	0
Actual ARF Paid:	\$16,414.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	20 Dec 2026
PARF Rebate Amount:	\$12,310.00
Intended COE Rebate Details	
COE Expiry Date:	20 Dec 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$48,000.00
COE Rebate Amount:	\$33,498.00
Total Rebate Amount:	\$45,808.00

The information contained herein is correct as at 27 Dec 2019

OK