15/5/2010

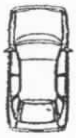
INS. CASE OWNER: JIMMY FOO | CC3/AIG19022971/Gea3 | LKK: IDAC:

ASSIGNMENT

Surveyor: XGQ DOI: 02/01/2020 Date / Time : 31.12.19

Registered in Merimen: 31.12.19

Pre-assign / CCU / FTE



Insured Vehicle No. : SKS 1584U

Name of Insured : CHOW WENG YING

Insured Tel No. : HP: +65-98509456

Excess Sec II :S$ D.O.A : 27/12/2019 11:30

Is driver the owner? (YES / NO)

If **NO**, Driver Name / Age :

Driver Tel No. : (V/L: YES / NO)

Claim No. :

Policy No. : 2100409897

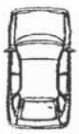
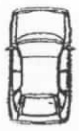
Make / Model : MAZDA 5 2.0 SKYACTIV

Place of Accident : RAMP AFTER TOH TUCK AVE TOWARDS ~~PIE TUAS~~

Nature of Accident :

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

Insured Liability : % **Final ? Yes / No**

SKS 1584U →	SLP 6864H →	SLP 8595X →	UNKNOWN
 INSRS: WSP: Tel : Liability : RMKS: OI	 INSRS: WSP: PREMIUM Tel : Liability : RMKS: TP 	INSRS: WSP: Tel : Liability : RMKS: 	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SLP 6864H - CC3/AIG19006834/Aqd3n2; DOA: 16.4.19
	SKS 1584U - 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$			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:	

ASS. REC. BY: bd. | REF: AIG

ASSIGNMENT

From: | Date: 2/1/2020

Estimated Cost:

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

To Inspect Vehicle No: SLP 6864H

at Workshop m/s premium

of 55 ubi Road 1

Insured:

Policy No.

Claims No.

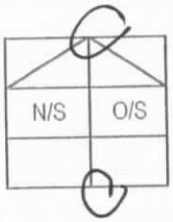
Sum Insured: | Excess:

(Client's Record)

Make of Veh: 10:30am

(Policy Condition)

Remark: **The veh had commenced its repair at the time of inspection.**



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 (wp)

Vehicle: IN / OUT

Date: | Person Contacted:

Veh No: SLP6864H | Yr Regn: 14 Jun 2017

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or

Make: Audi Q2 | c.c 999

Colour Red | A/C: Insured / Std / NI / NA

Sp.Reading 42897 | T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: WAUZZZGA3HA040768

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: 245/60 R18

R: 11

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.	6 mm	L/Bal.	6 mm
D.O.A.		D.O.I.	02-01-20

Survey held at W/S 11:30

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

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

Owner ID Type:	Singapore NRIC
Owner ID:	349C
Vehicle No.:	SLP6864H
Vehicle to be Exported:	No
Intended Deregistration Date:	02 Jan 2020
Vehicle Make:	AUDI
Vehicle Model:	Q2 1.0 TFSI S TRONIC
Primary Colour:	Red
Manufacturing Year:	2017
Engine No.:	CHZ345025
Chassis No.:	WAUZZZGA3HA040768
Maximum Power Output:	85.0 kW (113 bhp)
Open Market Value:	$26,074.00
Original Registration Date:	14 Jun 2017
First Registration Date:	14 Jun 2017
Transfer Count:	0
Actual ARF Paid:	$18,504.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	13 Jun 2027
PARF Rebate Amount:	$13,878.00
COE Expiry Date:	13 Jun 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	$45,201.00
COE Rebate Amount:	$33,662.00
Total Rebate Amount:	**$47,540.00**

The information contained herein is correct as at 02 Jan 2020

OK