15/5/2010

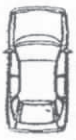
INS. CASE OWNER: JIMMY FOO | CC3/AIG19022972/Gea3 | LKK: IDAC:

ASSIGNMENT

Surveyor: XGQ DOI: 02/01/2010 Date / Time : 31.12.19

Registered in Merimen: 31.12.19

Pre-assign / CCU / FTE



Insured Vehicle No. : SCM 7798G Claim No. : 7753884493SG

Name of Insured : CHENG WAK HENG Policy No. : 2100503726

Insured Tel No. : HP: +65-96787798 Make / Model : MERCEDES-BENZ E200

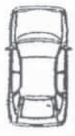
Excess Sec II :S$ D.O.A : 30/12/2019 09:50 Place of Accident : HOOT KIAM RD TOWARDS PATERSON HILL

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**

SMQ 7654Z → _____ → _____ → _____



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
	SMQ 7654Z - X SCM 7798G - X	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: Gil. REF: AIG

ASSIGNMENT

From: Date: 02/01/2020

Estimated Cost:

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

To Inspect Vehicle No: SMQ 7654Y

at Workshop m/s premium

of 55 Ubi Road 1

Insured:

Policy No.

Claims No.

Sum Insured: Excess:

(Client's Record)

Make of Veh: Vehicle In

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: $160K.

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: SMQ 7654Z Yr Regn: 29 Nov 2019

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

Make: Audi A4 2.0 c.c 1984

Colour white A/C: Insured / Std / NI / NA

Sp.Reading 860 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: WAUZZZF4XkA042648

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:

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Hankook

Front		Rear	
R/Bal.	9 mm	R/Bal.	9 mm
L/Bal.	9 mm	L/Bal.	9 mm
D.O.A.		D.O.I.	02-01-20

Survey held at w/s 11AM

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or WA o/s

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

Date / Time	Action / Instruction
	COE: 69041

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:	
___$ + RS___SI	
Photos	
Others	
TOTAL	

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	278I
Vehicle No.:	SMQ7654Z
Vehicle to be Exported:	No
Intended Deregistration Date:	02 Jan 2020
Vehicle Make:	AUDI
Vehicle Model:	A4 SEDAN 2.0 TFSI S TRONIC (NAV, 17")
Primary Colour:	White
Manufacturing Year:	2019
Engine No.:	CVK077172
Chassis No.:	WAUZZZF4XKA042648
Maximum Power Output:	140.0 kW (187 bhp)
Open Market Value:	$33,724.00
Original Registration Date:	29 Nov 2019
First Registration Date:	29 Nov 2019
Transfer Count:	0
Actual ARF Paid:	$39,214.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	28 Nov 2029
PARF Rebate Amount:	$29,410.00
COE Expiry Date:	28 Nov 2029
COE Category:	E - Open - all except motorcycle
COE Period(Years):	10
QP Paid:	$40,101.00
COE Rebate Amount:	$39,631.00
Total Rebate Amount:	**$69,041.00**

The information contained herein is correct as at 02 Jan 2020

OK