NS. CASE OWNER	: /	CC 4/111 2000	0092 /	Ales3 IDAC:
Surveyor:	Adrian	DOI:		Date / Time: 36 12/19
Pre-assign / CCU	/ FTE			Registered in Merimen:
Insured Vehicle No	SHC :	3981M	Claim No.	:
Name of Insured	T		Policy No.	1
Insured Tel No.	:	HP:	Make / Model	:
Excess Sec II :S\$		D.O.A: 25/12/19	Place of Accid	lent:
Is driver the owner	(YES / NO)	Nature of Accident :		
If NO, Driver Nan		(V/L: YES / NO)	OI GIA REPO Insured Liabili	ORT: YES / NO; TP GIA REPORT: YES / NO ity: % Final? Yes / No

INSRS:

Liability:

STAGE

Call OI:

LOD

Others:

Email

%

Confirm by:

Non-Reporting ltr (1st): Non-Reporting ltr (2nd): Non-Reporting ltr (Final): Notification ltr (if non-pickup):

After call ltr to OI:

Documentation Check List: Handler

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:

Payment Breakdown Form:

Call

If NO or B 28, Ass. Lia:

2) Report Format:

Call

3) Survey fee:

Email

Email

1) Claim status: Normal/Reject/Private Settle

Call

Post-Repair Photos:

RMKS:

WSP:

Tel:

WSP:

Tel:

Liability:

DATE / PIC

Typist

RMKS:

INSRS:

Liability:

SKT 5805 B: NA/INC 19027718 /24; DOA: 25/17/19

Sent By:

days) Reduction:

Confirm with

days)

days)

days)

Global Sum S\$:

Confirm with:

Name 1:

Name 2:

Name 3:

LOR + LOI

(Agreed / Assessed) BOLA S/N No. :

Confirm with:

[Tick only one]

(e.g. Tow/ Independent)

RMKS:

WSP:

Tel:

INSRS:

Liability:

Date/ Time

RMKS:

Tel:

WSP: N-1

PRELIMINARY ADVICE Date/Time:

Date/Time:

Date/Time:

(\$

(\$

LOR + LOU [

S\$

%

S\$

Date/Time:

FINALIZATION

FINAL SETTLEMENT

Loss of Rental (LOR):

Loss of Income (LOI):

LOR only LOU only

Loss of Use (LOU):

GIA/LTA Search

FINAL PAYMENT

Payee 2: (Strike if N.A.)

Payee 3: (Strike if N.A.)

Disbursement:

Medical:

Legal Cost

Total:

Payee 1:

Repair Cost:

Final Liability:

Repair Cost:

ASSIGNMENT

				Veh No:	SKT	(802)	Yr Regn	2007	JUNE .
Estimated Cost				Type: (Ca	M.Cycle/	Bus /-Van /	Lorry / Taxi / P	rime Mover /	
OD/TP/WS/	TP RES / O	D RES / EVA / INV / MV		Truc	k / Trailer or				
To Inspect Veh				Make:	Niss	an Syl	phy.	c.c 14'	98
at Workshop m				Colour	Silves		A/C: I	nsured / Std / N	II / NA
of				Sp.Reading	180	0618.	T/Radio: I	nsured / Std / I	NI / NA
Insured:				Eng/No:					
Policy No.				C/No:	JN	IBAAG	11201075	59	
Claims No.				Gen. Cond	Good Fair	/ Poor / Bur	nt		
Sum Insured:		Excess:		Steering: In	norer / Jamr	ned / Leake	d/Burnt or		
(Client's Reco	ord)			Brake: ¿	oder / Jamr	med / Leake	d/Burnt or		
Make of Veh:				Modi: N	il SIRim I	STD A/Rim	or		
				Tyre Size:	F:	195	165R15		
(Policy Cond	ition)				R:	195	165RIS		
Remark: The v		menced its	N/S O/S	BS / DUN	EXNOVA / G	SY / FS / LIZ	A / MIC / OHTS	SU / PIR / SUMI	1
repa	ir at the time	e of inspection.		TOYO/Y	OKO or	CI	ucero.		
Bal. or Market	Value:			Front			Rear		
		Consistent?: Yes	or No	R/Bal.	06	mm	R/Bal.	06	mm
GIA / PR Sec	en:	Consistent? : Yes	or No	L/Bal.	96	mm	L/Bal.	06	mm
Est. Repairs:		days Res.: Yes	or No	D.O.A.			D.O.I.	30/12/19	}.
Lum Sum:		% 3 Val.: Yes	or No	'Survey he	ld at	H	51	, ,	
CA / REV	I REP. I		Vahide: IN / OUT	Des. of Da			s I NIS I UIC	/ Rooftop or	
Date:	Per		vernois. 1147 OOT	The U				affected due to	collision.
Date / Time	Action /	Instruction							
	TP	111				COE	Expiry:	31 05 2	4
	PV:	12.3K	172 @ 6K X1	4.5 = 2	7K)				
Date/Time, File Pa	ass to?	: Preli. Report		Days Of F	Repair:	o:	Survey	Fee:	
	Return to?	econd.					Transport	alion:	
			Add Fee	: : Si	te Insp (\$)3+R	SSI	
				: In	erview (\$		r Photos		
A / REV / REP. / 24 HRS Vehicle: IN / O Date: Person Contacted: Date / Time Action / Instruction TP 111 MV: 27k (Perrecutation © 6k PV: 12.3k Nett: Nett: Preli. Report Date/Time, File Pass to? : Final Report			Ta	ch. Inve (d					
Lump Sum				:10					
* ,									

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Business	
Owner ID:	135C	
Vehicle Details		100
Vehicle No.:	SKT5805B	
Vehicle to be Exported:	Yes	
Intended Deregistration Date:	30 Dec 2019	
Vehicle Make:	NISSAN	
Vehicle Model:	SYLPHY 1.5 4AT	
Primary Colour:	Silver	
Manufacturing Year:	2009	
Engine No.:	HR15107550B	
Chassis No.:	JN1BAAG11Z0107559	
Maximum Power Output:	80.0 kW (107 bhp)	
Open Market Value:	\$20,131.00	
Original Registration Date:	09 Jun 2009	
First Registration Date:	09 Jun 2009	
Transfer Count:	3	
Actual ARF Paid:	\$20,131.00	
Intended PARF Rebate Details		
PARF Eligibility:	Forfeited	
PARF Eligibility Expiry Date:		
PARF Rebate Amount:	\$0.00	
Intended COE Rebate Details		
COE Expiry Date:	31 May 2024	
COE Category:	E - Open Category	
COE Period(Years):	5	
PQP Paid:	\$13,943.00	
COE Rebate Amount:	\$12,323.00	
Total Rebate Amount: Message	\$12,323.00	

Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 30 Dec 2019

Used Cars

Rental Cars

Sell My Car

Directory Products Insurance

Articles

Forum

Resources





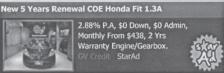
You can read customers' reviews & ratings on their services too.



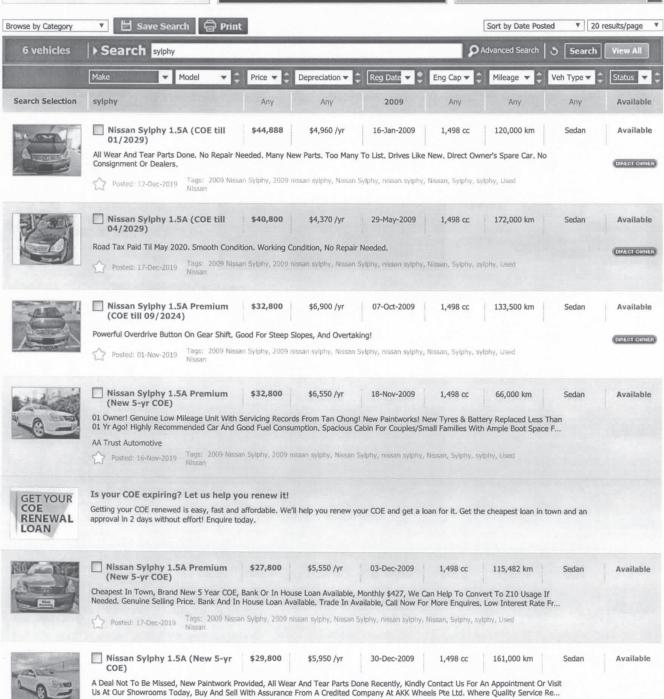


Post an Advertisement Sell it yourself! Advertise it at just \$58 until it's SOLD!

O Post an Ad Advertiser Login Ways of Selling







Compare [4] 🙆

Posted: 17-Dec-2019 Tags: 2009 Nissan Sylphy, 2009 nissan sylphy, Nissan Sylphy, nissan sylphy, Nissan, Sylphy, Sylphy, Used Nissan