15/5/2010			

INS. CASE OWNER: MERINA CHIA

## CC4/FCI20000394/Eha3

LKK: IDAC:

A CICIT	CHATA	1ENT
A		

	OTEL /E
	STEVE
HELIEN/OF*	OILVL

DOI: 14/01/2020

07/01/2020 Date / Time:

Registered in Merimen:

## Pre-assign / CCU / FTE



SHC 7258S Insured Vehicle No.

Claim No.

D20000073MFSH

Name of Insured

CITYCAB PTE LTD

Policy No.

Make / Model :

D-19092579MFSH

Insured Tel No.

HP:

HYUNDAI 140

Excess Sec II:S\$ Is driver the owner?

D.O.A: 26/12/2019 19:25

Place of Accident:

REPULIC BLVD TWDS ECP

If NO, Driver Name / Age: FONG KIM LOONG RAYMOND

(YES/NO)

Nature of Accident:

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

Driver Tel No.:

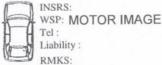
+65-97519870

(V/L: YES / NO)

Insured Liability:

Final? Yes/No

SMK 1721J





INSRS: WSP: Tel: Liability: RMKS:



INSRS: WSP: Tel: Liability: RMKS:



INSRS: WSP: Tel: Liability: RMKS:

Date/ Time		STAGE DATE/PIC
	SMK 1721J - X	DITTOL
	SHC 7258S - CS/FCI18020090/Dvbn2 ; DOA: 02.11.2018	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:
		If dyfficht Dictardown Louis
DELIMINADY ADVICE	Date/Time: Sent By:	
RELIMINARY ADVICE	Date/Time: Sent By:	Post-Repair Photos:
PRELIMINARY ADVICE		Post-Repair Photos:
FINALIZATION	Date/Time: Confirm with:	Post-Repair Photos: Others:
FINALIZATION Repair Cost:	Date/Time: Confirm with: S\$ ( days) Reduction: %	Post-Repair Photos: Others: Confirm by: Email Call
FINALIZATION Repair Cost: FINAL SETTLEMENT	Date/Time: Confirm with:  S\$ ( days) Reduction: %  Date/Time: Confirm with	Post-Repair Photos: Others: Confirm by: Email Call
FINALIZATION Repair Cost: FINAL SETTLEMENT Final Liability:	Date/Time:         Confirm with:           S\$ ( days) Reduction:         %           Date/Time:         Confirm with           % (Agreed / Assessed) BOLA S/N No. :         **	Post-Repair Photos: Others: Confirm by: Email Call
FINALIZATION Repair Cost: FINAL SETTLEMENT Final Liability: Repair Cost:	Date/Time:         Confirm with:           S\$ ( days) Reduction:         %           Date/Time:         Confirm with           % (Agreed / Assessed) BOLA S/N No.:         S\$	Post-Repair Photos: Others: Confirm by: Email Call
FINALIZATION Repair Cost: FINAL SETTLEMENT Final Liability: Repair Cost: Loss of Rental (LOR):	Date/Time:         Confirm with:           S\$ ( days) Reduction:         %           Date/Time:         Confirm with           % (Agreed / Assessed) BOLA S/N No.:         S\$           S\$ ( days)         S\$	Post-Repair Photos: Others: Confirm by: Email Call
FINALIZATION Repair Cost: FINAL SETTLEMENT Final Liability: Repair Cost: Loss of Rental (LOR): Loss of Use (LOU):	Date/Time:         Confirm with:           S\$ ( days) Reduction:         %           Date/Time:         Confirm with           % (Agreed / Assessed) BOLA S/N No.:         S\$           S\$ ( days)         S\$ (\$ x days)	Post-Repair Photos: Others: Confirm by: Email Call
FINALIZATION Repair Cost: FINAL SETTLEMENT Final Liability: Repair Cost: Loss of Rental (LOR): Loss of Use (LOU): Loss of Income (LOI):	Date/Time:         Confirm with:           S\$ ( days) Reduction:         %           Date/Time:         Confirm with           % (Agreed / Assessed) BOLA S/N No.:         S\$           S\$ ( days)         S\$ (\$ x days)           S\$ (\$ x days)         S\$ (\$ x days)	Post-Repair Photos:  Others:  Confirm by:  Email Call  Email Call
EINALIZATION Repair Cost: FINAL SETTLEMENT Final Liability: Repair Cost: Loss of Rental (LOR): Loss of Use (LOU): Loss of Income (LOI): LOR only LOU only	Date/Time:         Confirm with:           S\$ ( days) Reduction:         %           Date/Time:         Confirm with           % (Agreed / Assessed) BOLA S/N No.:         S\$           S\$ ( days)         S\$ (\$ x days)           S\$ (\$ x days)         LOR + LOU LOR + LOI [Tick only one]	Post-Repair Photos: Others:  Confirm by:  Email Call  If NO or B 28, Ass. Lia:
Repair Cost: FINAL SETTLEMENT Final Liability: Repair Cost: Loss of Rental (LOR): Loss of Use (LOU): Loss of Income (LOI): LOR only LOU only GIA/LTA Search	Date/Time:         Confirm with:           S\$         ( days) Reduction:         %           Date/Time:         Confirm with         %           %         (Agreed / Assessed) BOLA S/N No.:         S\$           S\$         ( days)           S\$         (\$ x days)           S\$         (\$ x days)           S\$         (\$ Tick only one)           S\$	Post-Repair Photos:  Others:  Confirm by:  Email Call  Email Call
TINALIZATION Repair Cost: TINAL SETTLEMENT Final Liability: Repair Cost: Loss of Rental (LOR): Loss of Use (LOU): LOSS of Income (LOI): LOR only LOU only GIA/LTA Search Medical:	Date/Time:         Confirm with:           S\$         ( days) Reduction:         %           Date/Time:         Confirm with         %           %         (Agreed / Assessed) BOLA S/N No.:         S\$           S\$         ( days)           S\$         (\$ x days)           S\$         (\$ x days)           S\$         (\$ Tick only one)           S\$         (\$ S\$	Post-Repair Photos: Others:  Confirm by:  Email Call  If NO or B 28, Ass. Lia:
Repair Cost: FINAL SETTLEMENT Final Liability: Repair Cost: Loss of Rental (LOR): Loss of Use (LOU): LOS only LOU only GIA/LTA Search Medical: Disbursement:	Date/Time:         Confirm with:           S\$         ( days) Reduction:         %           Date/Time:         Confirm with         %           %         (Agreed / Assessed) BOLA S/N No.:         S\$           S\$         ( days)         S\$           S\$         (\$ x days)         S\$           S\$         (\$ x days)         S\$           S\$         (\$ x days)         Tick only one           S\$         S\$           S\$         (e.g. Tow/ Independent)	Post-Repair Photos:  Others:  Confirm by:  Email Call  If NO or B 28, Ass. Lia:  1) Claim status: Normal/Reject/Private Settle
FINALIZATION Repair Cost: FINAL SETTLEMENT Final Liability: Repair Cost: Loss of Rental (LOR): Loss of Use (LOU): LOR only LOU only GIA/LTA Search Medical: Disbursement: Legal Cost	Date/Time:         Confirm with:           S\$         ( days) Reduction:         %           Date/Time:         Confirm with         %           %         (Agreed / Assessed) BOLA S/N No.:         S\$           S\$         ( days)         S\$           S\$         (\$ x days)           S\$         (\$ x days)           S\$         (\$ x days)           S\$         (\$ x for the control of the control	Post-Repair Photos:  Others:  Confirm by:  Email Call  Email Call  If NO or B 28, Ass. Lia:  1) Claim status: Normal/Reject/Private Settle  2) Report Format:
FINALIZATION Repair Cost: FINAL SETTLEMENT Final Liability: Repair Cost: Loss of Rental (LOR): Loss of Use (LOU): LOR only LOU only GIA/LTA Search Medical: Legal Cost Fotal:	Date/Time:   Confirm with:	Post-Repair Photos:  Others:  Confirm by:  Email Call  Email Call  If NO or B 28, Ass. Lia:  1) Claim status: Normal/Reject/Private Settle  2) Report Format:
FINALIZATION Repair Cost: FINAL SETTLEMENT Final Liability: Repair Cost: Loss of Rental (LOR): Loss of Use (LOU): Loss of Income (LOI): LOR only LOU only GIA/LTA Search Medical: Disbursement: Legal Cost Fotal: FINAL PAYMENT	Date/Time:         Confirm with:           S\$         ( days) Reduction:         %           Date/Time:         Confirm with         %           %         (Agreed / Assessed) BOLA S/N No.:         S\$           S\$         ( days)         S\$           S\$         (\$ x days)         S\$           S\$         (\$ x days)         Tick only one           S\$         S\$         S\$           S\$         (e.g. Tow/ Independent )         S\$           S\$         Global Sum S\$:         Confirm with:	Post-Repair Photos: Others: Confirm by:  Email Call If NO or B 28, Ass. Lia:  1) Claim status: Normal/Reject/Private Settle 2) Report Format: 3) Survey fee:
FINALIZATION Repair Cost: FINAL SETTLEMENT Final Liability: Repair Cost: Loss of Rental (LOR): Loss of Use (LOU): Loss of Income (LOI):	Date/Time:   Confirm with:	Post-Repair Photos: Others: Confirm by:  Email Call If NO or B 28, Ass. Lia:  1) Claim status: Normal/Reject/Private Settle 2) Report Format: 3) Survey fee:

	1			
	3			
Date/Time, File Pass to?	: Preli. Report	Day	s Of Repair:	
1)	: Final Report	Res	urvey No. of Trip:	Survey Fee:
Date/Time, File Return to?	and the same of th			Transportation:
2)		Add Fee:	: Site Insp (\$	)S+RS,SI
			: Interview (\$	) Photos
Report Format :			: Tech. Invs (\$	) Others
Lump Sum / LBJ: (\$		)	: Westrend (\$	
				TOTAL

## > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	593B
Vehicle No.:	SMK1721J
Vehicle to be Exported:	No
Intended Deregistration Date:	14 Jan 2020
Vehicle Make:	SUBARU
Vehicle Model:	FORESTER 2.0I-S EYESIGHT AWD CVT SR
Primary Colour:	Brown
Manufacturing Year:	2018
Engine No.:	FB20YF23032
Chassis No.:	JF1SK7KL5KG006359
Maximum Power Output:	
Open Market Value:	115.0 kW (154 bhp)
Original Registration Date:	\$17,309.00
First Registration Date:	29 Mar 2019
Transfer Count:	29 Mar 2019
Actual ARF Paid: Intended PARF Rebate Details	0 \$17,309.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	28 Mar 2029
PARF Rebate Amount: Intended COE Rebate Details	\$12,981.00
COE Expiry Date:	28 Mar 2029
COE Category:	
COE Period(Years):	B - Car above 1600cc or 97kW (130bhp) 10
QP Paid:	\$39,401.00
COE Rebate Amount:	
Total Rebate Amount:	\$36,265.00 <b>\$49,246.00</b>
information contained beauti	φ <del>47</del> ,240.00

The information contained herein is correct as at 14 Jan 2020

OK