5/5	201	0		

CC3/LPC20000787/Ada3

LKK: IDAC:

		1000000
INIC	CASE	OWNER:
41.417	CINDL	CHILITY.

ASSIGNMENT

urvevor:	ADRIAN
urvevor:	ADRIAN

DOI: 13/01/2020

Date / Time:

10.01.2020

Registered in Merimen:

Pre-assign / CCU / FTE



SMD 240Z Insured Vehicle No.

TENG LAN SIONG

19/20/20/VP05/022898 Claim No.

Policy No.

MERCEDES-BENZ E300-3.0 (A)

Z/19/VP05/024929-001

Excess Sec II:S\$

Driver Tel No.:

HP: D.O.A: 10/01/2020 Make / Model : Place of Accident: BEDOK SOUTH ROAD

Is driver the owner?

Name of Insured

Insured Tel No.

(YES / NO)

Nature of Accident :

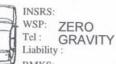
If NO, Driver Name / Age: QIU XIAOYUE +65-82844508

(V/L: YES / NO)

Insured Liability:

OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO Final? Yes/No

SGW 3518A





INSRS: WSP: Tel: Liability:



INSRS: WSP: Tel: Liability: RMKS.



INSRS: WSP: Tel: Liability: DWKC.

Date/ Time				
	SGW 3518A - NA/INC14024149	9/r3; DOA: 27.12.14	STAGE DA	ATE/PIC
			Non-Reporting ltr (1st):	ALE/FIC
	SMD 240Z NA/AIG20000716	6/z4; DOA: 10.01.2020	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:	ī
			Mandate/Reject Instruction:	
			LOD	=
			Payment Breakdown Form:	
RELIMINARY ADVICE	Date/Time: Sent By:		Post-Repair Photos:	
			Others:	7 -
INALIZATION	Date/Time: Confirm v	with:	Confirm by:	
epair Cost:	S\$ (days) Reduction	1: %	Email Call	
INAL SETTLEMENT	Date/Time: Confirm with		Email Call	
inal Liability:	% (Agreed / Assessed) BOLA S/I	N No. :	If NO or B 28, Ass. Lia:	
epair Cost:	SS		I 110 of D 20, Finn, Did .	
oss of Rental (LOR):	S\$ (days)			
oss of Use (LOU):	S\$ (\$ x days)			
oss of Income (LOI):	S\$ (\$ x days)			
OR only LOU only		Tick only one]		
IA/LTA Search	S\$			
ledical:	S\$		1) Claim status: Normal/Reject/Private	e Settle
isbursement:	S\$ (e.g. Tow/	/ Independent)	2) Report Format:	
egal Cost	S\$		3) Survey fee:	
otal:	S\$ Global Sum S\$:			
INAL PAYMENT	Date/Time: Confirm with:		Email Call	
ayee 1:	SS Name 1:			
ayee 2: (Strike if N.A.)	S\$ Name 2:			
ayee 3: (Strike if N.A.)	S\$ Name 3:			

ASSIGNMENT

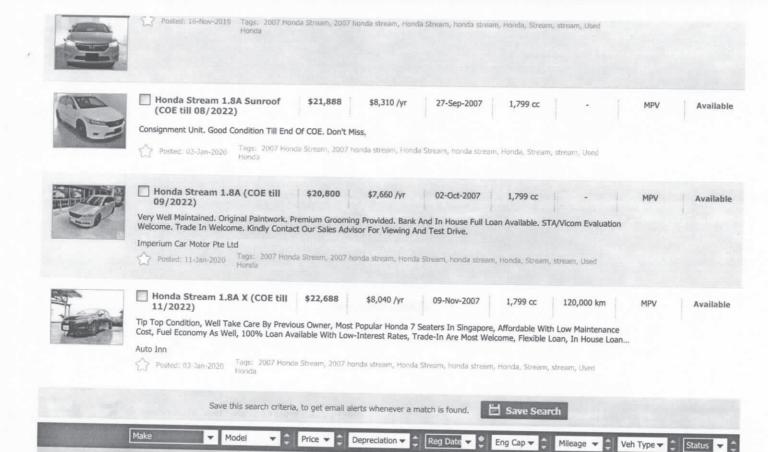
From: Date: 13(01)2	2020 Veh No: SGW 3518	14. Yr Regn: 2007 July
Estimated Cost:	Type: (M.Ca) / M.Cycle / Bus / Van	
OD (TP)WS/TP RES/OD RES/EVA/INV/MV	Truck / Trailer or	
To Inspect Vehicle No: SQW 3518A	Make: Horder St.	ean. c.c 1789
at Workshop m/s Zeno Gravity	Colour Black	A/C: Insured / Std / NI / NA
of skuki Bullit Ave 2 # 01-25 A		T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:	
Policy No.	C/No: R × 6/0	38637 .
Claims No.	Gen. Cond: Good/ Fair / Poor / Bu	ırnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leak	ed / Burnt or
(Client's Record)	Brake: Morder / Jammed / Leak	ed / Burnt or
Make of Veh:	Modi : Nil /S/Rim / STD A/Rim	or
	Tyre Size: F: 2051	65R15
(Policy Condition)	Tyre Size: F: 205/0 R: 205	165R15
Remark: The veh had commenced its N/S	O/S BS / DUN / EXNOVA / GY / FS / LIZ	2
repair at the time of inspection.	TOYO / YOKO or	
Bal. or Market Value:	Front	Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 06 mm	R/Bal. 06 mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. 06 mm	L/Bal. 06 mm
Est. Repairs: days Res.: Yes or No	D.O.A.	D.O.I. 13/01/20.
Lum Sum: % 3 Val.: Yes or No	Survey held at 7em	o Gravity.
CA / REV / REP. / 24 HRSIMP)	Des. of Damages : Frt / Rear / O/	S (N/S) (U) Rooftop or
	IN / OUT	
Date: Person Contacted:	The U/C / Chassis frame / Bo	ody Structure affected due to collision.
Date / Time Action / Instruction		
TP Confac.	COE Exply: 1	2/07/29.
	/	
mv 145K		
7V, 39.3K		
Nett: 5.7K.		
Date/Time, File Pass to?		
. Fren. Report	Days Of Repair:	
Date/Time, File Return to?	Resurvey No. of Trip:	Survey Fee:
	dd Foor Thousand	Transportation:
Α.	dd Fee: :Site Insp (\$)S+RS,SI
Poporé Formet	: Interview (\$) Photos
Report Format :	: Tech. Invs (\$) Others
ump Sum / LBJ: (\$)	: Weet end (\$	
		TOTAL

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC	
Owner ID:	168D	
Vehicle Details	the state of the s	400
Vehicle No.:	SGW3518A	
Vehicle to be Exported:	Yes	
Intended Deregistration Date:	13 Jan 2020	
Vehicle Make:	HONDA	
Vehicle Model:	STREAM 1.8 A	
Primary Colour:	Black	
Manufacturing Year:	2007	
Engine No.:	R18A1744728	
Chassis No.:	RN61039637	
Maximum Power Output:	103.0 kW (138 bhp)	
Open Market Value:	\$16,821.00	
Original Registration Date:	13 Jul 2007	
First Registration Date:	13 Jul 2007	
Transfer Count:	0	
Actual ARF Paid:	\$18,504.00	
Intended PARF Rebate Details	\$10,304.00	
PARF Eligibility:	Forfeited	
PARF Eligibility Expiry Date:	•	
PARF Rebate Amount:	\$0,00	
Intended COE Rebate Details	Selection of the select	TO STATE OF
COE Expiry Date:	12 Jul 2027	
COE Category:	B - Car (1601cc & above)	
COE Period(Years):	10	
PQP Paid:	\$52,473.00	
COE Rebate Amount:	\$39,334.00	
Total Rebate Amount:	\$39,334.00	
e information contained herein is correct as at 13 Jan 2020		





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