resemble.			

RACHEL WU

CC4/FCI20000970/Eka3

LKK: IDAC:

INS.	CASE	OW	NEK:

ASSIGNMENT DOI: 16/01/2020

14/01/2020 Date / Time:

Surveyor:

STEVE

Registered in Merimen:

Pre-assign / CCU / FTE

SHA 8139G

Claim No.

D20000247MFSH

Insured Vehicle No. Name of Insured

CITYCAB PTE LTD

HP:

D-20094921MFSH

Policy No.

HYUNDAI IONIQ

Insured Tel No. Excess Sec II :S\$

D.O.A: 06/01/2020 19:00

Make / Model : Place of Accident:

BLK 116A BEDOK NORTH ST 2 SERVICE ROAD

Х

Is driver the owner?

(YES / NO)

Nature of Accident :

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

If NO, Driver Name / Age:

Driver Tel No. :

SAY AH SOO +65-90083837

(V/L: YES / NO)

Insured Liability:

Final? Yes/No %

SFZ 2686A



INSRS: WSP: PML Tel: Liability:

RMKS:



INSRS: WSP: Tel: Liability: RMKS:



INSRS: WSP: Tel: Liability: RMKS:



INSRS: WSP: Tel: Liability: RMKS:

Date/ Time	SEZ SESEN NA/MSC	615020056/h4; DOA: 23/11/15	STAGE	DATE / PIC
	SFZ 2000A - NA/NISC	18011698/R1qd3s2; DOA: 23.6.18	Non-Reporting ltr (1st):	
	SHA 6139G - C3/FCI	18011030/1C1qu032, D0/1. 20.0.10	Non-Reporting ltr (2nd):	
			Non-Reporting ltr (Final):	
			Notification ltr (if non-pickup):	
			Call OI:	
			After call ltr to OI:	
			Documentation Check List: 1	landler 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:	
PRELIMINARY ADVICE	Date/Time:	Sent By:	Post-Repair Photos:	
KELIMINAKI ADVICE	Date Time.		Others:	
FINALIZATION	Date/Time:	Confirm with:	Confirm by:	
Repair Cost:	S\$ (days) Reduction: %	Email	Call
FINAL SETTLEMENT	Date/Time:	Confirm with	Email Call	
Final Liability:		Assessed) BOLA S/N No. :	If NO or B 28, Ass. Lia:	
Repair Cost:	SS			
Loss of Rental (LOR):	S\$ (days)		
Loss of Use (LOU):	S\$ (\$ x	days)		
Loss of Income (LOI):	S\$ (\$ x	days)		
LOR only LOU only		OR + LOI [Tick only one]		
GIA/LTA Search	SS			
Medical:	SS		1) Claim status: Normal/Reje	ct/Private Settle
Disbursement:	SS	(e.g. Tow/ Independent)	2) Report Format:	
Legal Cost	SS		3) Survey fee:	
Total:	S\$	Global Sum S\$:		
FINAL PAYMENT	Date/Time:	Confirm with:	Email Call	
	SS	Name 1:		
Payee 1:	S\$	Name 2:		
Payee 2: (Strike if N.A.)				
Payee 3: (Strike if N.A.)	S\$	Name 3:		

ASS, REC. BY: Steve REF: FCI	
	ASSIGNMENT
Date: 16/01/20	020 Veh No: SFZ 1686A Yr Regn: 13/5/16
TOTAL.	Type (M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Estimated Cost:	Truck / Trailer or
DD(TP) WS / TP RES / OD RES / EVA / INV / MV	2
To Inspect Vehicle No: SFZ 2686 A	Make: BMW 1160 c.c 1496
at Workshop m/s performance Motor	Colour Cluc A/C: Insured / Std / NI / NA
303 Alexandra Road	Sp.Reading 43216 T/Radio: Insured / Std / NI / NA
nsured:	Eng/No:
Policy No.	C/No: WBAIV720X 05 E07942
Claims No.	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Intorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh: Foong Shiuh Jye	Modi: Nil / S/R/m / STD A/Rim or
100.9	Tyre Size: F: 205/55RI6
(Policy Condition)	R: U
	O/S BS/DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or
Bal. or Market Value: DAC Accident Rport: Consistent? : Yes or No	Front Rear R/Bal. R/Bal. mm
GIA / PR Seen: Consistent?: Yes or No	7.10
Est. Repairs: days Res.: Yes or No	D.O.A. 6/1/20 D.O.I. 16/1/20
Lum Sum: % 3 Val.: Yes or No	Survey held at for falmonia Niffs
CA / REV / REP. / 24 HRS IOS>	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN Date: Person Contacted:	
	The U/C / Chassis frame / Body Structure affected due to collision
Date / Time Action / Instruction MV - 68 K	•
MILE	1
Date/Time, File Pass to? : Preli. Report	Dave Of Popair
Tron. Robote	Days Of Repair:
) : Final Report Date/Time, File Return to?	Resurvey No. of Trip: Survey Fee:
Ada	Transportation:
Add	Fee: : Site Insp (\$)s+Rssi
	: Interview (\$) Photos
Report Formst:	: Tech. Invs (8) Others
Lump Sum / LB.I: (\$)	:Weekend (\$)
	TOTAL

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

/ehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: /ehicle Details	565H
ehicle No.:	SFZ2686A
ehicle to be Exported:	No
ntended Deregistration Date:	16 Jan 2020
/ehicle Make:	B.M.W.
ehicle Model:	116D 5DR HATCHBACK DSC LED SR AB
rimary Colour:	Blue
lanufacturing Year:	2015
ngine No.:	33559450B37D15A
Chassis No.:	WBA1V720X05C07042
1aximum Power Output:	85.0 kW (113 bhp)
pen Market Value:	\$24,748.00
Original Registration Date:	13 May 2016
irst Registration Date:	13 May 2016
ransfer Count:	0
ctual ARF Paid: atended PARF Rebate Details	\$11,648.00
ARF Eligibility:	Yes
ARF Eligibility Expiry Date:	12 May 2026
ARF Rebate Amount: tended COE Rebate Details	\$8,736.00
OE Expiry Date:	12 May 2026
OE Category:	A - Car up to 1600cc & 97kW (130bhp)
OE Period(Years):	10
P Paid:	\$46,651.00
OE Rebate Amount:	\$29,488.00
otal Rebate Amount:	\$38,224.00

The information contained herein is correct as at 16 Jan 2020

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