14				

Surveyor:

INS. CASE OWNER: Sherini Pillai

CC4/III20001003/Epa3

LKK: IDAC:

CUPT O !!	14234		
			ASSIGNM
	STEVE	DOI:	16/01/2020
	SIEVE	20 00 00	

STEVE

Date / Time :

14/01/2020 16/01/2020 Registered in Merimen:

Pre-assign / CCU / FTE

X

Insured Vehicle No.

SHC 8422C

Claim No.

Name of Insured

COMFORT TRANSPORTATION PTE LTD

Policy No.

MCOM0015

Insured Tel No.

Make / Model :

HYUNDAI 140

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

(YES / NO)

D.O.A: 09/01/2020 13:30

Place of Accident:

UPP SERANGOON ROAD AFT HOUGAN

If NO, Driver Name / Age: LIM CHUNG HENG (LIN CONGXING)

Nature of Accident :

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

Driver Tel No.:

+65-92390832

(V/L: YES / NO)

Insured Liability:

Final? Yes/No

PA 9236H



RMKS:



INSRS: WSP: Tel: Liability: RMKS:



INSRS: WSP: Tel: Liability: RMKS:



%

INSRS: WSP: Tel: Liability: RMKS:

Date/ Time	DOM: 28 02 2018	STAGE DATE/PIC
	PA 9236H - CC4/AIG18006776/Seb3q2; DOA: 28.02.2018	Non-Reporting ltr (1st):
	SHC 8422C - CC4/III18021019/Npa3q2; doa: 15.11.18 - NS/INC18007025/K1qbn2; DOA: 14.4.18	Non-Reporting ltr (2nd):
	- NS/INC1800/025/K1qbn2; DOA . 14.4.18	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:
	Prote/Time: Sent By:	Post-Repair Photos:
PRELIMINARY ADVICE	Date/Time: Sent By.	Others:
		Confirm by:
	Confirm with:	
FINALIZATION	Date/Time: Confirm with:	Email Call
Repair Cost:	S\$ (days) Reduction: %	Email Call
Repair Cost:	S\$ (days) Reduction: % Date/Time: Confirm with	Email Call Email
Repair Cost: FINAL SETTLEMENT	S\$ (days) Reduction: %	Email Call
Repair Cost: FINAL SETTLEMENT Final Liability:	S\$ (days) Reduction: % Date/Time: Confirm with % (Agreed / Assessed) BOLA S/N No. : S\$	Email Call Email
tepair Cost: FINAL SETTLEMENT Final Liability: Repair Cost:	S\$ (days) Reduction: %	Email Call Email
Repair Cost: FINAL SETTLEMENT Final Liability: Repair Cost: Loss of Rental (LOR):	S\$ (days) Reduction: %	Email Call Email
Repair Cost: FINAL SETTLEMENT Final Liability: Repair Cost: Loss of Rental (LOR): Loss of Use (LOU):	S\$ (days) Reduction: %	Email Call Email
Repair Cost: FINAL SETTLEMENT Final Liability: Repair Cost: Loss of Rental (LOR): Loss of Use (LOU): Loss of Income (LOI):	S\$ (days) Reduction:	Email Call Email
Repair Cost: FINAL SETTLEMENT Final Liability: Repair Cost: Loss of Rental (LOR): Loss of Use (LOU): Loss of Income (LOI): LOR only LOU onl	S\$ (days) Reduction:	Email Call 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 onl GIA/LTA Search	S\$ (days) Reduction: %	Email Call Email Call If NO or B 28, Ass. Lia: 1) Claim status: Normal/Reject/Private Settle
Repair Cost: FINAL SETTLEMENT Final Liability: Repair Cost: Loss of Rental (LOR): Loss of Use (LOU): Loss of Income (LOI): LOR only LOU onl GIA/LTA Search Medical:	S\$	Email Call Email Call If NO or B 28, Ass. Lia: 1) Claim status: Normal/Reject/Private Settle 2) Report Format:
Repair Cost: FINAL SETTLEMENT Final Liability: Repair Cost: Loss of Rental (LOR): Loss of Use (LOU): Loss of Income (LOI): LOR only LOU onl GIA/LTA Search Medical: Disbursement:	S\$	Email Call Email Call If NO or B 28, Ass. Lia: 1) Claim status: Normal/Reject/Private Settle
Repair Cost: FINAL SETTLEMENT Final Liability: Repair Cost: Loss of Rental (LOR): Loss of Use (LOU): Loss of Income (LOI): LOR only LOU onl GIA/LTA Search Medical: Disbursement: Legal Cost	S\$	Email Call Email Call If NO or B 28, Ass. Lia: 1) Claim status: Normal/Reject/Private Settle 2) Report Format: 3) Survey fee:
GIA/LTA Search Medical: Disbursement: Legal Cost Total:	S\$	Email Call Email Call If NO or B 28, Ass. Lia: 1) Claim status: Normal/Reject/Private Settle 2) Report Format:
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> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID: Vehicle Details	083E
Vehicle No.:	PA9236H
Vehicle to be Exported:	No
ntended Deregistration Date:	16 Jan 2020
/ehicle Make:	SCANIA
/ehicle Model:	KUB4X2 9.3L A/T ABS TURBO
Primary Colour:	Multicolor
Manufacturing Year:	2009
Engine No.:	6601675
Chassis No.:	YS2K4X20001866728
Maximum Power Output:	•
Open Market Value:	\$153,875.00
Original Registration Date:	12 Jan 2010
irst Registration Date:	12 Jan 2010
ransfer Count:	2
Actual ARF Paid: ntended PARF Rebate Details	\$7,694.00
ARF Eligibility:	No
ARF Eligibility Expiry Date:	
ARF Rebate Amount: ntended COE Rebate Details	\$0.00
OE Expiry Date:	31 Dec 2024
OE Category:	C - Goods Vehicle & Bus
OE Period(Years):	5
QP Paid:	\$12,789.00
OE Rebate Amount:	\$12,678.00
otal Rebate Amount: Message	\$12,678.00
lease note that all future COE renewals for this veries and (if applicable) of the vehicle.	chicle can only be for a 5-year period, subject to the statutory

The information contained herein is correct as at 16 Jan 2020

OK