15/5/2010

INS. CASE OWNER: CHAN KIAN MENG | ~~CC3/AIG20001667/Qka3~~ CC3/AIG20001667/Qpa3 | LKK: IDAC:

## ASSIGNMENT

Surveyor: OI SUN PIN DOI: 23/01/2020 Date / Time : 23/01/2020

Registered in Merimen: 31/01/2020

**Pre-assign / CCU / FTE**

Insured Vehicle No. : SGN 43U Claim No. : 423863573SG

Name of Insured : SONG YAU KAR Policy No. : 2100435765

Insured Tel No. : HP: Make / Model : MAZDA CX5

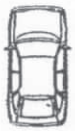
Excess Sec II :S$ D.O.A : 21/01/2020 09:20 Place of Accident : JALAN ANAK BUKIT

Is driver the owner? ( YES / NO ) Nature of Accident :

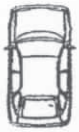
If NO, Driver Name / Age : LIAU EE WEI OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : (V/L: YES / NO ) Insured Liability : % **Final ? Yes / No**

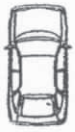
SMB 1590S → → →



INSRS:
WSP: SMRT, WL
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

| Date/ Time | | STAGE | DATE / PIC |
|---|---|---|---|
| | SMB 1590S - X SGN 43U - X | Non-Reporting ltr (1st): | |
| | | Non-Reporting ltr (2nd): | |
| | | Non-Reporting ltr (Final): | |
| | | Notification ltr (if non-pickup): | |
| | | Call OI: | |
| 08/06/2021 | Pls refer to VIEWS for details. | 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: | | |
| Post-Repair Photos: | | |
| Others: | | |

**PRELIMINARY ADVICE** Date/Time: Sent By:

**FINALIZATION** Date/Time: Confirm with: Confirm by:

Repair Cost: L/sum S$ 1,800.00 ( 2 days) Reduction: 65 % Email ☐ Call ☐

**FINAL SETTLEMENT** Date/Time: 08/06/2021 Confirm with Patrick Email ☑ Call ☐

| | | |
|---|---|---|
| Final Liability: | % 100 (Agreed / Assessed) BOLA S/N No. : NIL | If NO or B 28, Ass. Lia : |
| Repair Cost: | S$ 1,800.00 | |
| Loss of Rental (LOR): | S$ ( days) | |
| Loss of Use (LOU): | S$ 1,100.00 ($275 x 4 days) | |
| Loss of Income (LOI): | S$ ☑ ($ x days) | |
| LOR only ☐ LOU only ☑ LOR + LOU ☐ LOR + LOI ☐ [Tick only one] | | |
| GIA/LTA Search | S$ 7.00 | |
| Medical: | S$ | 1) Claim status: Normal/~~Reject/Private Settle~~ |
| Disbursement: | S$ (e.g. Tow/ Independent ) | 2) Report Format: TP |
| Legal Cost | S$ | 3) Survey fee: $320.00 |
| **Total:** | S$ 2,907.00 **Global Sum S$:** 2,807.00 | |

**FINAL PAYMENT** Date/Time: Confirm with: Email ☑ Call ☐

| | | | |
|---|---|---|---|
| Payee 1: | S$ 2,807.00 | Name 1: | SMRT BUSES LTD |
| Payee 2: (Strike if N.A.) | S$ | Name 2: | |
| Payee 3: (Strike if N.A.) | S$ | Name 3: | |

ASS. REC. BY: Sun Pin | REF: AIG. 003/1667/DK

# ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

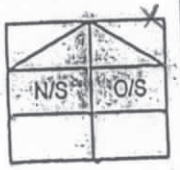
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.




Bal. or Market Value: _____

IDAC Accident Rport: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SMB1590S Yr Regn: 07/Jan/2015

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: MAN NL320F(A22) c.c 10518.

Colour: Multicolour. A/C: Insured / Std / NI / NA

Sp.Reading 461668. T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WMAA22228F7002562

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modl: Nil / S/Rim / STD A/Rim or _____

Tyre Size: F: 275/75 R22.5

R: 275/75 R22.5

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or _____

| Front | | Rear | |
|---|---|---|---|
| R/Bal. | 5 mm | R/Bal. | 5 mm |
| L/Bal. | 5 mm | L/Bal. | 5 mm |
| D.O.A. | 21/01/2020 | D.O.I. | 23/01/2020 |

Survey held at 4 SMRT

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or _____

The U/C / Chassis frame / Body Structure affected due to collision.

| Date / Time | Action / Instruction |
|---|---|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) _____

☐ : Prell. Report

☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ : Tech. Invs ($ _____)

☐ : Weekend ($ _____)

| | |
|---|---|
| Survey Fee: | |
| Transportation: | $ + RS $ |
| Photos | |
| Others | |
| TOTAL | |

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

| | |
|---|---|
| **Vehicle Owner Particulars** | |
| Owner ID Type: | Company |
| Owner ID: | 292D |
| **Vehicle Details** | |
| Vehicle No.: | SMB1590S |
| Vehicle to be Exported: | No |
| Intended Deregistration Date: | 30 Jan 2020 |
| Vehicle Make: | MAN |
| Vehicle Model: | NL 320F (A22) 11L AUTO ABS TURBO |
| Primary Colour: | Multicolor |
| Manufacturing Year: | 2014 |
| Engine No.: | 50339430983937 |
| Chassis No.: | WMAA22ZZ8F7002562 |
| Maximum Power Output: | - |
| Open Market Value: | $248,866.00 |
| Original Registration Date: | 07 Jan 2015 |
| First Registration Date: | 07 Jan 2015 |
| Transfer Count: | 0 |
| Actual ARF Paid: | $0.00 |
| **Intended PARF Rebate Details** | |
| PARF Eligibility: | No |
| PARF Eligibility Expiry Date: | - |
| PARF Rebate Amount: | $0.00 |
| **Intended COE Rebate Details** | |
| COE Rebate Amount: | $0.00 |
| **Total Rebate Amount:** | **$0.00** |

The information contained herein is correct as at 30 Jan 2020

OK