LKK:

INS. CASE OWNER:	KHOR Saw Theng 6568804754	CC4/ASM200	02036/Upa3	IDAC: 159022
	MARCUS	DOI: 05/02/2020	Date / Time	e: 05/02/2020
Surveyor:		_		in Merimen:
Pre-assign / CCU /	FTE			
Insured Vehicle No.	SKK 3693S		Claim No. : SON	M02F8X
Name of Insured	: LEE YIN WEI		Policy No. : VP	A/P1398851
		HP:	Make / Model : VO	LKSWAGEN GOLF A7 1.4 TSI
Insured Tel No.			CEI	ETAR RD ABT 4-5M AWAY FF
Excess Sec II :S\$		D.O.A : 03/02/2020 15:15	Place of Accident : 3LL	ICTION STRATTON RD
Is driver the owner	( YES / NO ) N	Nature of Accident :		
If NO. Driver Nam	ne / Age: LEE SOONG	CHUEN	OI GIA REPORT: YES / N	NO ; TP GIA REPORT: YES / NO
Driver Tel N	. 05 0040400		Insured Liability:	% Final ? Yes / No
SMQ 6926X	<u> </u>			
INSRS: WSP: Tel: Liability:	INSRS: WSP: Tel: Liability RMKS:		INSRS: WSP: Tel: Liability: RMKS:	INSRS: WSP: Tel: Liability: RMKS:
Date/ Time				
Dutter 1 mile	SMQ 6926X }		STAGE	DATE/PIC
	SKK 36935 3 INFVI	HG20001837/z4; DOA:	rion report	ting ltr (1st):
	- NA/F	CI15012651/r3; DOA:		ting ltr (2nd):
				ting ltr (Final):  a ltr (if non-pickup):
			Call OI:	ти (п поп-рокар).
			After call lt	r to OI:
			Documenta	ation Check List: Handler Typist
			Notification	ı ltr (if non-pickup)
			After call lt	r to OI:
			Authorisation	on To Act:
			Release Vo	ucher:
			Final Repai	r Bill:
			Car Rental	Invoice:
			Towing Inv	
			LTA / GIA	
			Medical Bi	11:
			PIR:	
				Reject Instruction:
			LOD Permant F	Prockdown Forms
		G P		Breakdown Form:
RELIMINARY ADVICE	Date/Time:	Sent By:	Post-Repa Others:	II PHOIOS:
	D . M:	Confirm with	Confirm t	DV.
INALIZATION	Date/Time:	Confirm with:	Commin	/J·

PRELIMINARY ADVICE	Date/Time:	Sent By:	Post-Repair Photos:
			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:	% (Agreed	/ Assessed) BOLA S/N No. :	If NO or B 28, Ass. Lia:
Repair Cost:	S\$		
Loss of Rental (LOR):	S\$ (	days)	
Loss of Use (LOU):	S\$ (\$ x	days)	
Loss of Income (LOI):	S\$ (\$ x	days)	
LOR only LOU only	LOR + LOU	LOR + LOI [Tick only one]	
GIA/LTA Search	S\$		
Medical:	S\$		Claim status: Normal/Reject/Private Settle
Disbursement:	S\$	(e.g. Tow/ Independent )	2) Report Format:
Legal Cost	S\$		3) Survey fee:
Fotal:	S\$	Global Sum S\$:	
FINAL PAYMENT	Date/Time:	Confirm with:	Email Call
Payee 1:	S\$	Name 1:	
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	

ASSIGNMENT  Onto Items (1)	08/11/13) wef ASS. REC. BY: Marcus	REF:	APA/ nous
Truck   Trule   Truck   Trule   Mover   Truck   Trule   Truck   Prime   Mover   Truck   Trule   Truck   Prime   Mover   Truck   Truck   Prime		ASS	IGNMENT
Truck   Trule   Truck   Trule   Mover   Truck   Trule   Truck   Prime   Mover   Truck   Trule   Truck   Prime   Mover   Truck   Truck   Prime	From:	Date:	Veh No: SM 06926X Yr Regn: 3/1/
Make: Coubte Coubte Afric Co. S. S. Colour Substantial Colour Arc. Insured I stal I NI I NA Sp. Reading 7 (623 TiRadio: Insured I stal I NI I NA Sp. Reading 7 (623 TiRadio: Insured I stal I NI I NA Sp. Reading 7 (623 TiRadio: Insured I stal I NI I NA Sp. Reading 7 (623 TiRadio: Insured I stal I NI I NA Sp. Reading 7 (623 TiRadio: Insured I stal I NI I NA Sp. Reading 7 (623 TiRadio: Insured I stal I NI I NA Sp. Reading 7 (623 TiRadio: Insured I stal I NI I NA Sp. Reading 7 (623 TiRadio: Insured I stal I NI I	Estimated Cost:		
Add Fee:    September   Septem	OD TP WS ITP RES I OD	RES / EVA / INV / MV	Truck/Trailer or Cyp /
Colour Sulve AC: Insured I Std I NI I NA Sp. Reading 7 4623 TirRadio: Insured I Std I NI I NA Sp. Reading 7 4623 TirRadio: Insured I Std I NI I NA Eng/No: Colloy No. Statisms No. Sum Insured:  (Cilien's Record)  Sale of Market Value: Consistent?: Yes or No Condition Ryor: Consistent?: Yes or No Co	To Inspect Vehicle No:		Make: Loyote coullo Attis c.c 1598
EngNo:   CNo:   MR OF REE (0 4/03 (7 CNo:	at Workshop m/s	Asia	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
CNO: CROCK CONCESSED CONCE	of		Sp.Reading 7 4623 T/Radio: Insured / Std / NI / NA
Cen. Cond/Good   Fair   Poor   Burnt   Cleints Record   C	Insured:		Eng/No:
Cen. Cond/Good   Fair   Poor   Burnt   Cleints Record   C	Policy No.		C/No: MRNG3REE.104103171
Steering: Ing@y   Jammed   Leaked   Burnt or Brake:   Collent's Record	Claims No.		Gen. Cond Good / Fair / Poor / Burnt
Client's Record   Brake:   Record   Sammed / Leaked / Burnt or   Modi:   Nill   Sirkin   STD AlRim or   Tyre Size:   F:   95	Sum Insured:	Excess:	Steering: Inproder / Jammed / Leaked / Burnt or
Modi: NII SIRIM STD AIRIM or Tyre Size: F: 95.66.7.6  R: BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / NOKO or Front R/Bal. 6 mm R/Bal. 6 mm R/Bal. 6 mm L/Bal. 6			Brake: Inorder Jammed / Leaked / Burnt or
(Policy Condition)  Remark: The veh had commenced its repair at the time of inspection.  Remark: The veh had commenced its repair at the time of inspection.  Remark: The veh had commenced its repair at the time of inspection.  Remark: The veh had commenced its repair at the time of inspection.  Repair at the time of inspection.  Repair and the time of	Make of Veh:		Modi: Nil S/Rim STD A/Rim or
(Policy Condition)  Remark: The veh had commenced its repair at the time of inspection.  Sal or Market Value:  DAC Accident Rport:  Consistent?: Yes or No  SIA / PR Seen:  Consistent?: Yes or No  Survey held at  Do.A. 3 Value of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or  The U/O Chassis frame / Body Structure affected due to collision  Date/Time  Action / Instruction  (\$0 L - I - 200			Tyre Size: F: 195-165-27
Remark: The veh had commenced its repair at the time of inspection.  Sal or Market Value:  DAC Accident Rport:  Consistent? : Yes or No  SIA / PR Seen:  Consistent? : Yes or No  SIA / PR Seen:  Consistent? : Yes or No  SIA / PR Seen:  Consistent? : Yes or No  SIA / PR Seen:  Consistent? : Yes or No  SIA / PR Seen:  Consistent? : Yes or No  SIA / PR Seen:  Consistent? : Yes or No  SIA / PR Seen:  Consistent? : Yes or No  SIA / PR Seen:  Consistent? : Yes or No  SIA / PR Seen:  Consistent? : Yes or No  SIA / PR Seen:  Consistent? : Yes or No  SIA / PR Seen:  Consistent? : Yes or No  D.O.A. 3	(Policy Condition)		,
repair at the time of inspection.  Sal or Market Value:  Consistent? : Yes or No  DAC Accident Rport:  Consistent? : Yes or No  DALE Repairs:  Adays Res.:  West or No  CA   REV   REP.   24 HRS  Vehicle: IN   OUT  Date / Time  Action / Instruction  (\$20 \ 2 - 1 - 2001) -    Implies      Date / Time, File Pass to?  Date / Time, File Return to?  Add Fee:    Site Insp (\$		nenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
Add Fee:    Stal or Market Value:   Stal or Market Val			1
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Date/Time, File Pass to?  Date/Time, File Return to?  Add Fee:  Add Fee:  Add Fee:  Add Fee:  Date/Time, File Return to?  Call Report  Date/Time, File Return to?  Add Fee:  Date/Time, File Return to?  Date/Time, File Return to?  Date/Time, File Return to?  Add Fee:  Date/Time, File Return to?  Add Fee:  Survey Fee:  Transportation:  Transpor		Consistent? Yes or No	
Date/Time   File Pass to?   Prell. Report   Person Contacted:   Date/Time   File Pass to?   Final Report   Person Contacted:   Cade File Pass to?   Final Report   Person Contacted:   Cade File Pass to?   Final Report   Person Contacted:   Cade File Pass to?   Prell. Report			1/04
Date/Time, File Pass to?  Date/Time, File Return to?  Add Fee:  Strey Held at  Date/Time, File Return to?  Add Fee:  Strey Held at  Days Of Repair:  Resurvey No. of Trip:  Transportation:  Survey Fee:  Transportation:  Survey Fee:  Transportation:  Survey Fee:  Transportation:  Survey Fee:  Transportation:  Date/Time, File Return to?  Add Fee:  Strey Held at  Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or  No. Clear S  The WG / Chassis frame / Body Structure affected due to collision  Date/Time, File Pass to?  Days Of Repair:  Resurvey No. of Trip:  Survey Fee:  Transportation:  Date/Time, File Return to?  Add Fee:  Stite Insp (\$ ) _S+RS_S!  Interview (\$ ) Photos  Trech. Invs (\$ ) Others  Weekend (\$ )		. V . V	- 1
Date/Time, File Pass to?  Date/Time, File Return to?  Add Fee:    Site Insport		22/2	3(1/00
Vehicle: IN/OUT  Date / Time Person Contacted:  Date / Time Action / Instruction  Cool 1 - 1 - 2001 - (Intt	Lum Sum:	70	
Date / Time   Action / Instruction   Cook   - 1 - 2004   - 11 - 2004   -	CA / REV / REP. / 2	4 HK3	0.1/10
Date/Time Action / Instruction  (so L-1-201/, // Mth. Me44 6697)  Date/Time, File Pass to? : Prell. Report Days Of Repair:  1) : Final Report Resurvey No. of Trip: Survey Fee: Transportation:  Date/Time, File Return to? Add Fee: : Site Insp (\$ ) _s + RSSI  : Interview (\$ ) Photos  Report Format:  Lump Sum / I.B.I: (\$ ) : Weekend (\$ )	Date: Perso		The UIC I Chassis frame I Body Structure affected due to collision.
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Date/Time, File Pass to?  : Preli. Report  : Final Report  Date/Time, File Return to?  2)  Add Fee:  : Site Insp (\$ )S+RS,SI  : Interview (\$ ) Photos  Report Format:  Lump Sum / I.B.I: (\$ )	(30	1-1-201/, 11 mth. 184	(6697
Date/Time, File Pass to?  : Preli. Report  : Final Report  Date/Time, File Return to?  2)  Add Fee:  : Site Insp (\$ )S+RS,SI  : Interview (\$ ) Photos  Report Format:  Lump Sum / I.B.I: (\$ )			
Transportation:  Add Fee: Site Insp (\$ )S+RS,S     Interview (\$ ) Photos    Report Format :		,,	
Transportation:  Add Fee: Site Insp (\$ )S+RS,S     Interview (\$ ) Photos    Report Format :	Date/Time File Pass to?	Preli Report	Days Of Repair:
1)	Date/Time, the Pass to		
2)  Add Fee: : Site Insp (\$ )S+RS,SI : Interview (\$ ) Photos  Report Format : : Tech. Invs (\$ ) Others  Lump Sum / I.B.I: (\$ ) : Weekend (\$ )	1) Dete/Time File Peturn to?	: Final Report	Robotroy not or the
Interview (\$ ) Photos		Add Fe	ee:   : Site Insp (\$ )S+RS,SI
Report Format :       : Tech. Invs (\$) Others         Lump Sum / I.B.I: (\$)       : Weekend (\$)	2)	, , ,	
Lump Sum / I.B.I: (\$ )	Depart Format		
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	Lump Sum / I.B.I. (3		

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Any

Sedan

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Toyota Corolla Altis 1.6A No Admin Fee, Low Mileage, Perfect Condition, Well Maintenance By Previous Owner.

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Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	Campany	
Owner ID Type:	Company	
Owner ID:	654Z	
Vehicle Details	SMQ6926X	
Vehicle No.:	No.	
Vehicle to be Exported:	06 Feb 2020	
Intended Deregistration Date:	TOYOTA	
Vehicle Make:	COROLLA ALTIS 1.6 AUTO	
Vehicle Model:		
Primary Colour:	Silver 2010	
Manufacturing Year:	1ZRX027748	
Engine No.:	MR053REE104103177	
Chassis No.:	90.0 kW (120 bhp)	
Maximum Power Output:	\$16,446.00	
Open Market Value:	03 Jan 2011	
Original Registration Date:	03 Jan 2011	
First Registration Date:		
Transfer Count:	1 \$16,446.00	
Actual ARF Paid: Intended PARF Rebate Details	\$16,446.00	
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	02 Jan 2021	
PARF Rebate Amount: Intended COE Rebate Details	\$8,223.00	
COE Expiry Date:	02 Jan 2021	
COE Category:	A - Car (1600cc & below)	
COE Period(Years):	10	
	\$34,001.00	
QP Paid: COE Rebate Amount:	\$3,080.00	
Total Rebate Amount:	\$11,303.00	

The information contained herein is correct as at 06 Feb 2020

ОК