INS. CASE OWNE	R:	CC 4/A/G2000	2340 /	Eks3	IDAC:	
		ASSIGN				
Cuminum	Steve		12020	Date / Time :	10/2/2020	
Surveyor:	- 004			Registered in Mer	11/2/2 22	
Pre-assign / CCU	/FTE			Registered in Mer	imen:	
Insured Vehicle No. : SRA ()		4	Claim No.	:		
Name of Insured			Policy No.	:	<u> </u>	
Insured Tel No.		HD.	Make / Model			
Excess Sec II :SS		D.O.A: >> 7070	Place of Accid			
			Place of Accid	ent:		
Is driver the owner	r? (YES / NO)	Nature of Accident :				
If NO, Driver Name / Age:				OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO		
Driver Tel No. :		(V/L: YES / NO)	Insured Liabil	Insured Liability: % Final? Yes / No		
	SK/	4154	SUV 68	3657 —	→ SJN8913 X	
INSRS: WSP: Tel: Liability: RMKS:	INSRS WSP: Tel: Liabilit RMKS		INSRS: WSP: (ud Tel: Liability: RMKS: (H	INSRS: WSP: Tel: Liability: RMKS:	
Date/ Time						
	SLV68653: X			STAGE	DATE / PIC	
	SKAISY: X		*	Non-Reporting ltr		
				Non-Reporting ltr		
439				Notification ltr (if i		
A.A.				Call OI:		
- B				After call ltr to OI:		
					heck List: Handler Typist	
				Notification ltr (if i		
				After call ltr to OI: Authorisation To A		
67				Release Voucher:	ACL.	
70				Final Repair Bill:		
				Car Rental Invoice		
				Towing Invoice		
				LTA / GIA :		
				Medical Bill:		
				PIR:		
				Mandate/Reject I	nstruction:	
				LOD		
PRELIMINARY ADVICE	Data/Times	Ct D		Payment Breakdo		
FRELIVIIIVARI ADVICE	Date/Time:	Sent By:		Post-Repair Photo Others:	os:	
FINALIZATION	Date/Time:	Confirm with:		Confirm by:		
Repair Cost:	S\$ (days) Reduction:	%	Commin by.	Email Call	
FINAL SETTLEMENT	Date/Time:	Confirm with		Email Cal		
Final Liability:	% (Agreed /	Assessed) BOLA S/N No. :		If NO or B 28, A		
Repair Cost:	S\$					
Loss of Rental (LOR):	S\$ (days)				
Loss of Use (LOU):	S\$ (\$ x	days)				
Loss of Income (LOI):	S\$ (\$ x	days)	2			
LOR only LOU only		OR + LOI [Tick only one				
GIA/LTA Search Medical:	S\$			1) Claim etatus: 3	Normal/Reject/Private Settle	
Disbursement:	S\$ S\$	(e.g. Tow/ Independen	nt)	Claim status: 1 Report Format		
Legal Cost	S\$	(e.g. 10w/ independer	10 /	3) Survey fee:		
Total:	S\$	Global Sum S\$:				
FINAL PAYMENT	Date/Time:	Confirm with:		Email Ca	11	
Payee 1:	S\$	Name 1:				
Payee 2: (Strike if N.A.)	S\$	Name 2:				
Payee 3: (Strike if N.A.)	S\$	Name 3:				

ASS, REG. BY: ASSIGNMENT SLT 6865 TRegn: 7/11/17 Veh No: Date: From: Type: M.Car) M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Estimated Cost: Truck / Trailer or OD / TP / WS / TP RES / OD RES / EVA / INV / MV C.C N/A (Elech Car) Blue Car Make: To Inspect Vehicle No: White A/C: Insured / Std / NI / NA Colour at Workshop m/s T/Radio: Insured / Std / NI / NA Sp.Reading of Eng/No: Insured: VL4BCEB4RHT002919 C/No: Policy No. Gen. Cond: Good / Fair / Poor / Burnt Claims No. Steering: Inorder / Jammed / Leaked / Burnt or Excess: Sum Insured: Indrder / Jammed / Leaked / Burnt or (Client's Record) NII / STRIP Modi: Make of Veh: Tyre Size: (Policy Condition) BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / N/S O/S Remark: The veh had commenced its repair at the time of inspection. TOYO / YOKO or Rear Front Bal. or Market Value: R/Bal Consistent?: Yes or No mm **IDAC Accident Rport:** L/Bal. mm Consistent?: Yes or No GIA / PR Seen: mm D.O.A. D.O.I. Res.: Yes or No days Est. Repairs: 3 Val.: Yes or No Survey held at Lum Sum: Rear / O/S / N/S / U/C / Rooftop or Des. of Damages (Frt. CA / REV / REP. / 24 HRS Vehicle: IN / OUT Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision. Date / Time Action / Instruction Date/Time, File Pass to? Days Of Repair: Preli. Report Survey Fee: Resurvey No. of Trip: **Final Report** Transportation: Date/Time, File Return to? Add Fee: Site Insp S+RS. SI Interview Photos Tech. Invs (3) Others Report Format: Westend (\$ Lump Sum / LBJ: (4 TOTAL

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars			
Owner ID Type:	Company		
Owner ID: Vehicle Details	259H		
Vehicle No.:	SLT6865J		
Vehicle to be Exported:	No		
Intended Deregistration Date:	10 Feb 2020		
Vehicle Make:	BLUECAR		
Vehicle Model:	BLUECAR		
Primary Colour:	White		
Manufacturing Year:	2017		
Engine No.:	•		
Chassis No.:	VL4BCEB4RHT002918		
Maximum Power Output:	50.0 kW (67 bhp)		
Open Market Value:	\$34,668.00		
Original Registration Date:	07 Nov 2017		
First Registration Date:	07 Nov 2017		
Transfer Count:	0		
Actual ARF Paid: Intended PARF Rebate Details	\$10,536.00		
PARF Eligibility:	Yes		
PARF Eligibility Expiry Date:	06 Nov 2027		
PARF Rebate Amount: Intended COE Rebate Details	\$7,902.00		
COE Expiry Date:	06 Nov 2027		
COE Category:	A - Car up to 1600cc & 97kW (130bhp)		
COE Period(Years):	10		
PQP Paid:	\$41,994.00		
COE Rebate Amount:	\$32,502.00		
Total Rebate Amount:	\$40,404.00		

The information contained herein is correct as at 10 Feb 2020

OK