

15/5/2010

INS. CASE OWNER:

KHONG Lynn
68804892

CC4/ASM20002702/ Kga3

LKK:

IDAC:

160874

Surveyor:

Kenneth

DOI:

ASSIGNMENT

17/02/2020

Date / Time : 17/02/2020

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : XE 381P

Claim No. : S0M02G2P

X

Name of Insured : WYN2000 TRANSPORT & CONTAINER SERVICES P/L

Policy No. : P1681827

Insured Tel No. : HP: —

Make / Model : VOLVO FM370-10.8 D (M)

Excess Sec II : S\$ D.O.A : 11/02/2020 04:40

Place of Accident : PIE TOWARDS TUAS NEAR TRELLIS TOWERS

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

If NO, Driver Name / Age : ONG CHUAN KWEE

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

Driver Tel No. : +65-96255551

(V/L: YES / NO)

Insured Liability : % Final ? Yes / No

YP 4941C

INSRS:
WSP: AE AUTO
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	YP 4941C - X	XE 381P - X	STAGE	DATE / PIC
			Non-Reporting ltr (1st):	
			Non-Reporting ltr (2nd):	
			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:	☐
			Post-Repair Photos:	☐
			Others:	☐
PRELIMINARY ADVICE Date/Time: Sent By:				
FINALIZATION Date/Time: Confirm with:			Confirm by:	
Repair Cost: L/S	S\$ 6500.00	(7 days) Reduction: 31,634.69 % 83	Email ☐	Call ☐
FINAL SETTLEMENT Date/Time: 18/08/2020 Confirm with RYAN			Email ☒	Call ☐
Final Liability:	% 80	(Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :	
Repair Cost: 6500.00	S\$ 5200.00			
Loss of Rental (LOR): 321.00	S\$ 256.80	(5 days) x \$64.20 (W/GST)	AXA'S INSTRUCTION, NO BOLA APPLY.	
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\$ 2.00		1) Claim status: ☒ Normal/Reject/Private Settle	
Medical:	S\$		2) Report Format: TP	
Disbursement:	S\$	(e.g. Tow/ Independent)	3) Survey fee: \$350.00	
Legal Cost	S\$			
Total:	S\$ 5458.80	Global Sum S\$:		
FINAL PAYMENT Date/Time: Confirm with:			Email ☒ Call ☐	
Payee 1:	S\$ 5458.80	Name 1: AE AUTO PTE LTD		
Payee 2: (Strike if N.A.)	S\$	Name 2:		
Payee 3: (Strike if N.A.)	S\$	Name 3:		

ASS. REC. BY:

REF:

AXA/

Kenneth

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 Rpt:

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

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

EST not ready

Veh No:

YP 4941C

Yr Regn:

11, 16

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

Truck / Trailer or

Make:

Mit Cante

c.c

2998

Colour

White

A/C:

Insured / Std / NI / NA

Sp. Reading

24023

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

1 FEB 71 EA 20366

Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModl: Nil / S/Rlm / STD A/Rlm or

Tyre Size:

F:

215 / 75 R17

R:

(D)

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

Front

Rear

R/Bal.

9

mm

R/Bal.

9

mm

L/Bal.

9

mm

L/Bal.

9

mm

D.O.A.

11 / 12 / 20

D.O.I.

17 / 2 / 2020

Survey held at

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, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

S - RS - SI

Factors

Others

TOTAL

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Report Format :

Lump Sum / I.B.I: (\$

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle****Vehicle Owner Particulars**

Owner ID Type:

Company

Owner ID:

701W

Vehicle Details

Vehicle No.:

YP4941C

Vehicle to be Exported:

Yes

Intended Deregistration Date:

14 Feb 2020

Vehicle Make:

MITSUBISHI

Vehicle Model:

CANTER FEB71ER4SDEC

Primary Colour:

White

Manufacturing Year:

2016

Engine No.:

4P10C44159

Chassis No.:

FEB71EA20366

Maximum Power Output:

-

Open Market Value:

\$37,080.00

Original Registration Date:

30 Nov 2016

First Registration Date:

30 Nov 2016

Transfer Count:

0

Actual ARF Paid:

\$1,854.00

Intended PARF Rebate Details

PARF Eligibility:

No

PARF Eligibility Expiry Date:

-

PARF Rebate Amount:

\$0.00

Intended COE Rebate Details

COE Expiry Date:

29 Nov 2026

COE Category:

C - Goods Vehicle & Bus

COE Period(Years):

10

PQP Paid:

\$36,277.00

COE Rebate Amount:

\$24,638.00

Total Rebate Amount:

\$24,638.00

The information contained herein is correct as at 14 Feb 2020

OK