

INS. CASE OWNER:

ASSIGNMENT

Surveyor:

MARCUS

DOI: 18/02/2020

Date / Time: 18/02/2020

Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : SHC 153G

Claim No. : _____

Name of Insured : CITYCAB PTE LTD

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$

D.O.A : 05/02/2020

Place of Accident : _____

Is driver the owner? (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 Liability : %

Final ? Yes / No

FBL 3347T



INSRS:

WSP: EROFIA

Tel : MOTOR

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time	STAGE	DATE / PIC
FBL 3347T - CS/MSG20002332/AGyf3; DOA: 09.02.2020	Non-Reporting ltr (1st):	
NA/MSG20002281/z4- ; DOA: 09.02.2020	Non-Reporting ltr (2nd):	
SHC 153G -CC3/AIG14019476/H1pm3w2 ; DOA: 13.10.14	Non-Reporting ltr (Final):	
CC3/FCI15005656/Kqbk3 ; DOA: 14.12.14	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: 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\$		1) Claim status: Normal/Reject/Private Settle
Disbursement: S\$	(e.g. Tow/ Independent)	2) Report Format:
Legal Cost S\$		3) Survey fee:
Total: 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:	

(08/11/13) wef

ASS. REC. BY: Marcus

REF:

Feil

ASSIGNMENT

9.16

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:

GLA / PR Seen:

Est. Repairs:

Lum Sum:

Consistent? : Yes or No

Consistent? : Yes or No

4 days Res.: Yes or No

20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

L7A #4258 6y3. Tmbh

L/S #1100

Veh No:

FRL 3347 T

Yr Regn:

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

Truck / Trailer or

Make:

Honda CBF190WH

C.C

184

Colour:

Red

A/C: Insured / Std / NI / NA

Sp. Reading

21619

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

LWBMC 469 6H.110 4221

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

110-70R17

R:

140-70R17

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Radio 1

Front

R/Bal.

6

mm

Rear

R/Bal.

6

mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

5/1/20

D.O.I.

18/2/20

Survey held at

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

N/S. O/S Both

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

Date/Time, File Pass to?

☐ : Preli. Report
☐ : Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

) S + RS, SI

) Photos

) Others

Add Fee:

☐ : Site Insp (\$

☐ : Interview (\$

☐ : Tech. Invs (\$

☐ : Weekend (\$

TOTAL

Report Format :

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

Honda CBF190X Fighthawk

Listing Type	Paid Ad
Brand	Honda (/listing/usedbike/brand/honda/)
Model	Honda CBF190X Fighthawk (/listing/usedbike/model/honda-cbf190x-firehawk/)
Engine Capacity	184cc
Classification	Class 2B (/listing/usedbike/model/motorcycle-for-sale/class/class-2b/)
Registration Date	11/10/2017
COE Expiry Date	10/10/2027 (7 years 7 months left)
Mileage	-
No. of owners	-
Type of Vehicle	Sport Tourers (/listing/usedbike/model/motorcycle-for-sale/sport-tourers/)

Price: SGD\$8000

DETAILS

Good Condition. Come To Yong Seng Heng Motor. Price Is Neg. Trade In/Loan Available.

Renew Your COE At Only 1.88% - Full Loan & Fast Approval

Full Loan Applicable with \$0 Downpayment. Lowest Interest in Town at 1.88%
platinummotoring.com.sg

Ad ▾

OPEN

SIMILAR BIKES

VIEW ALL (/LISTING/USEDBIKES/LISTING/)



Honda CBF190X Fighthawk



Honda XL125V Varadero

> **Back to OneMotoring**

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	810F
Vehicle Details	
Vehicle No.:	FBL3347T
Vehicle to be Exported:	No
Intended Deregistration Date:	18 Feb 2020
Vehicle Make:	HONDA
Vehicle Model:	CBF190WH
Primary Colour:	Red
Manufacturing Year:	2016
Engine No.:	MC46E5014780
Chassis No.:	LWBMC4696H1104221
Maximum Power Output:	-
Open Market Value:	\$2,888.00
Original Registration Date:	06 Sep 2016
First Registration Date:	06 Sep 2016
Transfer Count:	1
Actual ARF Paid:	\$434.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	05 Sep 2026
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$6,503.00
COE Rebate Amount:	\$4,258.00
Total Rebate Amount:	\$4,258.00

The information contained herein is correct as at 18 Feb 2020

OK