

INS. CASE OWNER:

MAY CHUA

CC4/FCI20002948/ E ha3

LKK:

IDAC:

Surveyor:

81WE

DOI:

ASSIGNMENT

20/2/2020

Date / Time : 19/02/2020

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SHC 1400L

Claim No. : D20001024MFSH X

Name of Insured : COMFORT TRANSPORTATION PTE LTD

Policy No. : D-20094922MFSH

Insured Tel No. : HP: D.O.A : 13/02/2020 12:15

Make / Model : TOYOTA PRIUS HYBRID 4G

Excess Sec II : S\$

Place of Accident : TAXI STAND AT MANDAI ZOO

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

SHA 8942D

INSRS:  
WSP: DING  
Tel : AUTOMOTIVE  
Liability :  
RMKS:INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:INSRS:  
WSP:  
Tel :  
Liability :  
RMKS:

| Date/ Time  | STAGE                              | DATE / PIC                               |
|---|------------------------------------|--|
| SHC1400L -  | CC4/AIG19021548/Fea3 ; 04/12/2019  | Non-Reporting ltr (1st):                 |
|   | CI2/FCI13011652/K1 ; 06/04/2013    | Non-Reporting ltr (2nd):                 |
|   | CS/FCI16016013/Gqbq2 ; 22/08/2016  | Non-Reporting ltr (Final):               |
|   | NS/INC14002140/Ytm3k3 ; 03/02/2014 | Notification ltr (if non-pickup):        |
| SHA 8942D - X   |                                    | 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:                  |
| PRELIMINARY ADVICE  | Date/Time:                         | Sent By:                                 |
| FINALIZATION  | Date/Time:                         | Confirm with:                            |
| Repair Cost:  | S\$                                | ( days) Reduction: %                     |
| FINAL SETTLEMENT  | Date/Time:                         | Confirm with:                            |
| Final Liability:  | %                                  | (Agreed / Assessed) BOLA S/N No. :       |
| 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 <input type="checkbox"/> LOU only <input type="checkbox"/> LOR + LOU <input type="checkbox"/> LOR + LOI <input type="checkbox"/> [Tick only one] |                                    |  |
| GIA/LTA Search  | S\$                                |  |
| Medical:  | S\$                                |  |
| Disbursement:   | S\$                                | (e.g. Tow/ Independent )                 |
| Legal Cost  | S\$                                |  |
| Total:  | S\$                                | Global Sum S\$:                          |
| FINAL PAYMENT   | Date/Time:                         | Confirm with:                            |
| Payee 1:  | S\$                                | Name 1:                                  |
| Payee 2: (Strike if N.A.)   | S\$                                | Name 2:                                  |
| Payee 3: (Strike if N.A.)   | S\$                                | Name 3:                                  |

ASS. REC. BY:

Steve

REF: FCI

## ASSIGNMENT

From:

Date: 20/02/2020

Veh No:

SHA 89420

Yr Regn:

28/9/17

Estimated Cost:

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

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

Truck / Trailer or

To Inspect Vehicle No:

SHA 89420

Make:

Toyota Prius

C.C.

1797

at Workshop m/s

Ding Automotive

Colour

Yellow

A/C: Insured / Std / NI / NA

of

31 Corporation Road

Sp. Reading

343221

T/Radio: Insured / Std / NI / NA

Insured:

Eng/No:

Policy No.

C/No:

JTDKBJF4 103564222

Claims No.

Gen. Cond: Good / Fair / Poor / Burnt

Sum Insured:

Excess:

Steering: Inorder / Jammed / Leaked / Burnt or

(Client's Record)

Brake: Inorder / Jammed / Leaked / Burnt or

Make of Veh:

After 10am

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

velan @ 9689 1857

Tyre Size:

F: 195/65R15

R:

11

(Policy Condition)

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

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

TOYO / YOKO or

Valley Stone

Bal. or Market Value:

Front

Rear

IDAC Accident Rpt:

Consistent? : Yes or No

R/Bal.

5

mm

R/Bal.

5

mm

GIA / PR Seen:

Consistent? : Yes or No

L/Bal.

5

mm

L/Bal.

5

mm

Est. Repairs:

days

Res.: Yes or No

D.O.A.

13/2/20

D.O.I.

20/2/20

Lum Sum:

%

3 Val.: Yes or No

Survey held at

Ding Automotive

CA / REV / REP. / 24 HRS

(DS)

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

Vehicle: IN / OUT

Date:

Person Contacted:

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

Date / Time Action / Instruction

Date/Time, File Pass to?

☐

Preli. Report

Days Of Repair:

1)

☐

Final Report

Resurvey No. of Trip:

Date/Time, File Return to?

2)

Add Fee:

☐

Site Insp (\$

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

Report Format :

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

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

|   |                                      |
|---|--------------------------------------|
| <b>Vehicle Owner Particulars</b>  |                                      |
| Owner ID Type:  | Company                              |
| Owner ID:   | 839G                                 |
| <b>Vehicle Details</b>  |                                      |
| Vehicle No.:  | SHA8942D                             |
| Vehicle to be Exported:   | No                                   |
| Intended Deregistration Date:   | 20 Feb 2020                          |
| Vehicle Make:   | TOYOTA                               |
| Vehicle Model:  | PRIUS HYBRID 1.8 CVT                 |
| Primary Colour:   | Yellow                               |
| Manufacturing Year:   | 2017                                 |
| Engine No.:   | 2ZRS064004                           |
| Chassis No.:  | JTDKB3FU103564222                    |
| Maximum Power Output:   | 90.0 kW (120 bhp)                    |
| Open Market Value:  | \$29,007.00                          |
| Original Registration Date:   | 28 Sep 2017                          |
| First Registration Date:  | 28 Sep 2017                          |
| Transfer Count:   | 0                                    |
| Actual ARF Paid:  | \$5,000.00                           |
| <b>Intended PARF Rebate Details</b>   |                                      |
| PARF Eligibility:   | Yes                                  |
| PARF Eligibility Expiry Date:   | 27 Sep 2025                          |
| PARF Rebate Amount:   | \$3,750.00                           |
| <b>Intended COE Rebate Details</b>  |                                      |
| COE Expiry Date:  | 27 Sep 2025                          |
| COE Category:   | A - Car up to 1600cc & 97kW (130bhp) |
| COE Period(Years):  | 8                                    |
| PQP Paid:   | \$35,265.00                          |
| COE Rebate Amount:  | \$24,697.00                          |
| <b>Total Rebate Amount:</b>   | <b>\$28,447.00</b>                   |
| <b>Message</b>  |                                      |
| Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier. |                                      |

The information contained herein is correct as at 20 Feb 2020

OK