

INS. CASE OWNER:

CC4 / 111 2000 3325 / Kgs3

Surveyor:

Kenneth

DOI:

ASSIGNMENT

24/2/2020

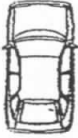
Date / Time:

24/2/2020

Registered in Merimen:

28/2/2020

Pre-assign / CCU / FTE



Insured Vehicle No. : SHA 7022R

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II : S\$ _____ D.O.A : 23/2/2020

Place of Accident : _____

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

If NO, Driver Name / Age : _____

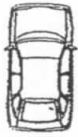
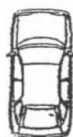
OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : _____

(V/L: YES / NO)

Insured Liability : % Final ? Yes / No

SKK3149Y

INSRS:
WSP: Allswell
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	STAGE		DATE / PIC
SKK3149Y: CC4/AXA/60/1259/M129362; DOA: 16/6/16	Non-Reporting ltr (1st):		
SHA 7022R: CC3/111/18012945/K+L 362; DOA: 8/7/18	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\$ 2500.00 (4 days)	Reduction: 2526.89 % 50	Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 09/09/2020	Confirm with BEN	Email ☒ Call ☐
Final Liability:	% 100 (Agreed / Assessed)	BOLA S/N No. : 15	If NO or B 28, Ass. Lia :
Repair Cost:	S\$ 2675.00 (W/GST)		
Loss of Rental (LOR):	S\$ 400.00 (4 days) x \$100		
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\$ 7.45		
Medical:	S\$		
Disbursement:	S\$ 45.00 (e.g. Tow/ Independent)		
Legal Cost	S\$		
Total:	S\$ 3127.45	Global Sum S\$:	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☒ Call ☐
Payee 1:	S\$ 3127.45	Name 1: ALLSWELL MOTOR TRADERS	
Payee 2: (Strike if N.A.)	S\$	Name 2:	
Payee 3: (Strike if N.A.)	S\$	Name 3:	

1) Claim status: ☒ Normal/Reject/Private Settle

2) Report Format: TP

3) Survey fee: \$350.00

ASS. REC. BY:

REF: 10 /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: 89,500

IDAC Accident Rpt: _____

Consistent?: Yes or No

GIA / PR Seen: _____

Consistent?: Yes or No

Est. Repairs: 04 days

Res.: Yes or No

Lum Sum: 20 %

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____

Person Contacted: _____

Vehicle: IN / OUT

Veh No: SKK 31494Yr Regn: 06, 06Type: M/Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: NIS Pylphc.c. 1498Colour: N.P. white

A/C: Insured / Std / NI / NA

Sp. Reading: 202.771

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JNIBAA G11 80100267Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModl: NII 1.8 R1m / STD A/R1m orTyre Size: F:R: 195/65 R15BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

Front

R/Bal. 8 mm

Rear

R/Bal. 8 mmL/Bal. 8 mmL/Bal. 8 mmD.O.A. 23/2/20D.O.I. 27/2/2020

Survey held at _____

Des. of Damages: Frt / Rear / O/S / N/S / UIC / Rooftop or NIS B1

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

1 GIA & EM not in the wksp.28/2 11 Dm & 2 Mod email

Date/Time, File Pass to?

☐

: Prell. Report

☐

: Final Report

1)

Date/Time, File Return to?

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

S + RS. \$

Fees

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:	Singapore NRIC
Owner ID:	212F
Vehicle Details	
Vehicle No.:	SKK3149Y
Vehicle to be Exported:	Yes
Intended Deregistration Date:	29 Feb 2020
Vehicle Make:	NISSAN
Vehicle Model:	SYLPHY 1.5 4AT
Primary Colour:	White
Manufacturing Year:	2006
Engine No.:	HR15334380
Chassis No.:	JN1BAAG11Z0100267
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$17,830.00
Original Registration Date:	01 Jun 2006
First Registration Date:	01 Jun 2006
Transfer Count:	2
Actual ARF Paid:	\$19,613.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	31 May 2021
COE Category:	E - Open Category
COE Period(Years):	5
PQP Paid:	\$22,789.00
COE Rebate Amount:	\$5,697.00
Total Rebate Amount:	\$5,697.00
Message	
Please note that the 5-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 25 Feb 2020

OK