15/5/2010

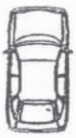
INS. CASE OWNER: RACHEL WU | CC4/FCI20003649/ K ha3 | LKK: IDAC:

ASSIGNMENT

Surveyor: Kenneth DOI: 11/03/2020 Date / Time : 05/03/2020

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : SHA 8829Z | Claim No. : D20001300MFSH

Name of Insured : CITYCAB PTE LTD | Policy No. : D-20094921MFSH

Insured Tel No. : _____ HP: _____ | Make / Model : TOYOTA PRIUS TAXI-1.8 (A)

Excess Sec II :S$ _____ D.O.A : 01/03/2020 14:40 | Place of Accident : ALONG PAYA LEBAR ROAD TOWARDS ~~GEYLANG~~

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

If **NO**, Driver Name / Age : TAN HOCK SOON | OI GIA REPORT: (YES) / NO ; TP GIA REPORT: (YES) / NO

Driver Tel No. : +65-97349512 (V/L: YES / NO) | Insured Liability : % **Final ? Yes / No**

SMM 1342J → _____ → _____ → _____

INSRS:
WSP: Optima Werkz
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time		STAGE	DATE / PIC
	SMM 1342J - X	Non-Reporting ltr (1st):	
	SHA 8829Z - CC4/ASM19004842/Egb3s2 ; 15/03/2019	Non-Reporting ltr (2nd):	
	CS/FCI18003849/Krd3n2 ; 19/02/2018	Non-Reporting ltr (Final):	
	CS/FCI19007266/Ksd3n2 ; 20/04/2019	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:	

ASS. REC. BY:

REF: FCI

ASSIGNMENT

From: _____ Date: 11.3.2020

Estimated Cost: _____

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

To Inspect Vehicle No: SNM 1342J

at Workshop m/s Optima Workz

of 9A Serangoon North Ave 5

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: morning

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: $116k

IDAC Accident Rport: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 03 days Res.: Yes or No

Lum Sum: 1.B.1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS mp"

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SNM 1342J Yr Regn: 06 19

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

Truck / Trailer or (A) Wagon

Make: Toy Noah c.c 1797

Colour M. P. White A/C: Insured / Std / NI / NA

Sp.Reading 78695 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: ZWR80 - 0382120

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: 195/65R15

R: _____

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

TOYO / YOKO or _____

Front		Rear	
R/Bal.	8 mm	R/Bal.	8 mm
L/Bal.	8 mm	L/Bal.	8 mm
D.O.A.	1/3/20	D.O.I.	11/3/20

Survey held at _____

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

O/S frt body

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

Date / Time	Action / Instruction
12/3	@ $51.88 email

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) _____

☐ : Preli. Report

☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ : Tech. Invs ($ _____)

☐ : Weekend ($ _____)

Report Format : _____

Lump Sum / I.B.I: ($ _____)

Survey Fee:	
Transportation:	
___S + RS.___SI	
Photos	
Others	
TOTAL	

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	227K
Vehicle Details	
Vehicle No.:	SMM1342J
Vehicle to be Exported:	Yes
Intended Deregistration Date:	02 Mar 2020
Vehicle Make:	TOYOTA
Vehicle Model:	NOAH HYBRID 1.8X CVT
Primary Colour:	White
Manufacturing Year:	2019
Engine No.:	2ZR0D50759
Chassis No.:	ZWR800382120
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	$33,706.00
Original Registration Date:	18 Jun 2019
First Registration Date:	18 Jun 2019
Transfer Count:	0
Actual ARF Paid:	$29,189.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	17 Jun 2029
PARF Rebate Amount:	$21,891.00
Intended COE Rebate Details	
COE Expiry Date:	17 Jun 2029
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	$39,728.00
COE Rebate Amount:	$31,782.00
Total Rebate Amount:	**$53,673.00**

The information contained herein is correct as at 02 Mar 2020

OK