

INS. CASE OWNER:

CC4 / FC120003881 / E93

ASSIGNMENT

Surveyor: steve DOI: _____ Date / Time : _____

Registered in Merimen: —

Pre-assign / CCU / FTE



Insured Vehicle No. : SHB 2733A Claim No. : _____
 Name of Insured : _____ Policy No. : _____
 Insured Tel No. : _____ HP: _____ Make / Model : _____
 Excess Sec II :SS _____ D.O.A : 7/3/2020 Place of Accident : Bukit Timah Road
 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

SMK 873K → _____ → _____ → _____



INSRS: _____
 WSP: MDVA Automotive
 Tel : _____
 Liability : _____
 RMKS: _____



INSRS: _____
 WSP: _____
 Tel : _____
 Liability : _____
 RMKS: _____



INSRS: _____
 WSP: _____
 Tel : _____
 Liability : _____
 RMKS: _____



INSRS: _____
 WSP: _____
 Tel : _____
 Liability : _____
 RMKS: _____

| Date/ Time | STAGE | DATE / PIC |
|---|-----------------------------------|---|
| <u>SMK 873K - X</u> | Non-Reporting ltr (1st): | |
| <u>SHB 2733A - CS/FC118013533/Usbe2 7/2/10/18</u> | 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) | <input type="checkbox"/> <input type="checkbox"/> |
| | After call ltr to OI: | <input type="checkbox"/> <input type="checkbox"/> |
| | Authorisation To Act: | <input type="checkbox"/> <input type="checkbox"/> |
| | Release Voucher: | <input type="checkbox"/> <input type="checkbox"/> |
| | Final Repair Bill: | <input type="checkbox"/> <input type="checkbox"/> |
| | Car Rental Invoice: | <input type="checkbox"/> <input type="checkbox"/> |
| | Towing Invoice | <input type="checkbox"/> <input type="checkbox"/> |
| | LTA / GIA : | <input type="checkbox"/> <input type="checkbox"/> |
| | Medical Bill: | <input type="checkbox"/> <input type="checkbox"/> |
| | PIR: | <input type="checkbox"/> <input type="checkbox"/> |
| | Mandate/Reject Instruction: | <input type="checkbox"/> <input type="checkbox"/> |
| | LOD | <input type="checkbox"/> <input type="checkbox"/> |
| | Payment Breakdown Form: | <input type="checkbox"/> <input type="checkbox"/> |
| | Post-Repair Photos: | <input type="checkbox"/> <input type="checkbox"/> |
| | Others: | <input type="checkbox"/> <input type="checkbox"/> |

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\$ _____

Disbursement: S\$ _____ (e.g. Tow/ Independent)

Legal Cost S\$ _____

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: Steve

REF: FCI

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.

| | |
|-----|-----|
| N/S | O/S |
| | |

Bal. or Market Value: _____

IDAC Accident Rport: _____ 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

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SMK 873K Yr Regn: 6/1/12

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

Truck / Trailer or

Make: Peugeot 3098 c.c. 1598

Colour: White A/C: Insured / Std / NI / NA

Sp. Reading: 110621 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: VF3095FVARB SJ01900

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: 225/50R17

R: 11

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

TOYO / YOKO or

Front _____ Rear _____

R/Bal. 5 mm R/Bal. 5 mm

L/Bal. 5 mm L/Bal. 5 mm

D.O.A. 7/3/20 D.O.I. 10/3/20

Survey held at Mova, fan Yang Road

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

Rear RH

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

| Date / Time | Action / Instruction |
|-------------|----------------------|
| | <u>MV - 32,000</u> |
| | <u>PV - 22,572</u> |
| | <u>NV - 9428</u> |
| | |
| | |
| | |
| | |
| | |
| | |

Date/Time, File Pass to?

: Preli. Report
 : Final Report

1)

Date/Time, File Return to?

2)

Report Format: _____

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

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech. Invs (\$ _____)

: Weekend (\$ _____)

Survey Fee: _____

Transportation: _____

S + RS. SI _____

Photos _____

Others _____

TOTAL _____

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Enquire PARF/COE Rebate for Registered Vehicle

| Vehicle Owner Particulars | |
|-------------------------------------|--------------------------|
| Owner ID Type: | Singapore NRIC |
| Owner ID: | 262F |
| Vehicle Details | |
| Vehicle No.: | SMK873K |
| Vehicle to be Exported: | No |
| Intended Deregistration Date: | 07 Mar 2020 |
| Vehicle Make: | PEUGEOT |
| Vehicle Model: | 3008 TURBO 1.6 ADVENTURE |
| Primary Colour: | White |
| Manufacturing Year: | 2011 |
| Engine No.: | 10FJBW1337585 |
| Chassis No.: | VF30U5FVABS301900 |
| Maximum Power Output: | 115.0 kW (154 bhp) |
| Open Market Value: | \$24,329.00 |
| Original Registration Date: | 06 Jan 2012 |
| First Registration Date: | 06 Jan 2012 |
| Transfer Count: | 1 |
| Actual ARF Paid: | \$24,329.00 |
| Intended PARF Rebate Details | |
| PARF Eligibility: | Yes |
| PARF Eligibility Expiry Date: | 05 Jan 2022 |
| PARF Rebate Amount: | \$13,380.00 |
| Intended COE Rebate Details | |
| COE Expiry Date: | 05 Jan 2022 |
| COE Category: | A - Car (1600cc & below) |
| COE Period(Years): | 10 |
| QP Paid: | \$50,289.00 |
| COE Rebate Amount: | \$9,192.00 |
| Total Rebate Amount: | \$22,572.00 |

The information contained herein is correct as at 07 Mar 2020

OK

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Speedo Motoring StarAd



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A PEACE OF MIND

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2 vehicles

Peugeot 3008

Advanced Search 🔍

| | Make | Model | Price | Depreciation | Reg Date | Eng Cap | Mileage | Veh Type | Status |
|--|---|----------------------|----------|--------------|-------------|----------|---------|--------------|----------|
| Search Selection | Peugeot 3008 | | Any | Any | 2012 | Any | Any | Any | Availabl |
|  | Peugeot 3008 | 1.6A Turbo Adventure | \$32,000 | \$10,870 /yr | 06-Jan-2012 | 1,598 cc | - | Stationwagon | Availabl |
| | Powerful, Fuel Economical, Low Depreciation, Nice No. Plate, Spacious Cabin And Large Trunk. High Paper Value, Loan Quantum, Trade In Can Be Discussed. 100% Accident Free. Beautiful Paint. Well Maintained, As Good As New! View To Believe! Agent Service. Flexible Loan... 360 VR Cars Posted: 15-Feb-2020 Tags: 2012 Peugeot 3008, Peugeot 3008, Peugeot, 3008 | | | | | | | | |
|  | Peugeot 3008 | 1.6A Turbo Adventure | \$35,800 | \$9,490 /yr | 18-Oct-2012 | 1,598 cc | - | Stationwagon | Availabl |
| | Powerful, Fuel Economical, Spacious Interior, High Paper Value, Selling At Paper Value Plus Export Body Price Only, Agent Service. Full Loan And Trade-in Available! Call For Viewing Now! Posted: 05-Mar-2020 Tags: 2012 Peugeot 3008, Peugeot 3008, Peugeot, 3008 | | | | | | | | |

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