

INS. CASE OWNER:

CC4/EQ120004124/Apa3

LKK:

IDAC:

ASSIGNMENT

Surveyor:

ADRIAN

DOI:

17/03/2020

Date / Time :

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : SLM 5305C

Name of Insured : _____

Insured Tel No. : _____ HP: _____

Excess Sec II :S\$ _____ D.O.A : 12/03/2020

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

Claim No. : _____

Policy No. : _____

Make / Model : _____

Place of Accident : _____

If NO, Driver Name / Age :

Driver Tel No. :

(V/L: YES / NO)

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

Insured Liability : % **Final ? Yes / No**

SCA 8388M



INSRS:

WSP: **PRECISE AUTO**

Tel : _____

Liability : _____

RMKS: _____



INSRS:

WSP: _____

Tel : _____

Liability : _____

RMKS: _____



INSRS:

WSP: _____

Tel : _____

Liability : _____

RMKS: _____



INSRS:

WSP: _____

Tel : _____

Liability : _____

RMKS: _____

Date/ Time	STAGE	DATE / PIC
	Non-Reporting ltr (1st):	
	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:	
Repair Cost: S\$	(days) Reduction: %	Email <input type="checkbox"/> Call <input type="checkbox"/>
FINAL SETTLEMENT Date/Time:	Confirm with:	
Final Liability: %	(Agreed / Assessed) BOLA S/N No. :	Email <input type="checkbox"/> Call <input type="checkbox"/>
Repair Cost: S\$		If NO or B 28, Ass. Lia :
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)	1) Claim status: Normal/Reject/Private Settle
Legal Cost S\$		2) Report Format:
		3) Survey fee:
Total: S\$	Global Sum S\$:	Email <input type="checkbox"/> Call <input type="checkbox"/>
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: Admin

REF: EQ

ASSIGNMENT

12/04/10

From:

Date:

17.3.10

Estimated Cost:

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

To Inspect Vehicle No: SCA 8388 M

at Workshop m/s Precise Auto

of NO 1 Kaki Bukit Ave 6

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: 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

np"

Vehicle: IN / OUT

Date: Person Contacted:

Veh No:

SCA8388M

Yr Regn: 2010 April

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

Truck / Trailer or

Make:

Toyota Camry

c.c 1998

Colour:

Silver

A/C: Insured / Std / NI / NA

Sp. Reading

114104

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

MROS3BK4107054528

Gen. Cond: ☒ Good / Fair / Poor / BurntSteering: ☒ In order / Jammed / Leaked / Burnt orBrake: ☒ In order / Jammed / Leaked / Burnt orModi: Nil / ☒ S/Rim / STD A/Rim or

Tyre Size:

F: 215/60R16

R: 215/60R16

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

TOYO / YOKO or

Front

Rear

R/Bal.

06

mm

R/Bal.

06

mm

L/Bal.

06

mm

L/Bal.

06

mm

D.O.A.

D.O.I.

17/03/20

Survey held at

Precise

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

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

Date / Time Action / Instruction

TPEQ

COE Expiry: 11/04/20

(Pending COE Renewal)

MV: 16K

PV: 13.8K

Nett: 2.2K

Date/Time, File Pass to?

☐

Preli. Report

1)

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Report Format:

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

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	054B
Vehicle Details	
Vehicle No.:	SCA8388M
Vehicle to be Exported:	Yes
Intended Deregistration Date:	17 Mar 2020
Vehicle Make:	TOYOTA
Vehicle Model:	CAMRY 2.0 AUTO ABS AIRBAG
Primary Colour:	Silver
Manufacturing Year:	2009
Engine No.:	1AZE161909
Chassis No.:	MR053BK4107054528
Maximum Power Output:	108.0 kW (144 bhp)
Open Market Value:	\$27,271.00
Original Registration Date:	12 Apr 2010
First Registration Date:	12 Apr 2010
Transfer Count:	0
Actual ARF Paid:	\$27,271.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	11 Apr 2020
PARF Rebate Amount:	\$13,635.00
Intended COE Rebate Details	
COE Expiry Date:	11 Apr 2020
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
QP Paid:	\$26,389.00
COE Rebate Amount:	\$179.00
Total Rebate Amount:	\$13,814.00

The information contained herein is correct as at 17 Mar 2020

OK