15/5/20	110	
13/3/20	Hu.	

LKK:

INS. CASE OWNER	2.	CC4/FCI2	20004196/5	da3	IDAC:		
Into. Crists o William		ASSI	GNMENT				
	CTOLE		103/ 2020	Date / Time :	9/03/2020		
Surveyor:	STEVE			Registered in Merim			
n	/ POTE			Registered in Merini			_
Pre-assign / CCU							
Insured Vehicle No	sHC 1637X		Claim No.	:			
Name of Insured	:		Policy No.	:			
Q_Q			Make / Model				
Insured Tel No.							
Excess Sec II :S\$		D.A: <u>01/03/2020</u>	Place of Accid	ient:			
Is driver the owner	? (YES / NO ) Nat	ure of Accident :					
If NO, Driver Nar	me / Age :			ORT: YES / NO ; TP (		S/NO	
Driver Tel	No. :	(V/L: YES / NO)	Insured Liabil	ity: % 1	Final? Yes/No		
SGA 6488Z					<b>→</b>		
INSRS:	IROKARS INSRS: WSP:		INSRS: WSP:		INSRS: WSP:		
WSP: TRANS EL	JROKARS WSF:	10-7	Tel:	1 4	Tel:		
Liability:	Liability:	B-9	Liability:	6-9	Liability:		
RMKS:	RMKS:		RMKS:		RMKS:		
Date/ Time							
	SGA 6488Z - X			STAGE		TE / PIC	
				Non-Reporting ltr (1st			
	SHC 1637X - X			Non-Reporting ltr (2n Non-Reporting ltr (Fir			
				Notification ltr (if non			
				Call OI:			
				After call ltr to OI:  Documentation Chee	ale Liste Handley	Tuniet	
				Notification ltr (if non		Typist	7
				After call ltr to OI;	-ріскир)		_
				Authorisation To Act:		j	
				Release Voucher:			
				Final Repair Bill:			
				Car Rental Invoice:			
				Towing Invoice		<u>-                                    </u>	┽
				LTA / GIA :			-
				Medical Bill: PIR:		+  -	=
				Mandate/Reject Inst	mustion:	<del>-</del> -	=
				LOD	ruction.	1 -	=
				Payment Breakdown	n Form:		ī
PRELIMINARY ADVICE	Date/Time:	Sent By:		Post-Repair Photos:			
				Others:			
FINALIZATION	Date/Time:	Confirm with:		Confirm by:			
Repair Cost:	S\$ (	days) Reduction:	%		Email Call _		
FINAL SETTLEMENT		nfirm with		Email Call			
Final Liability: Repair Cost:	% (Agreed / Asse	essed) BOLA S/N No. :		If NO or B 28, Ass.	Lia:		
Loss of Rental (LOR):		days)					
Loss of Use (LOU):	S\$ (\$ x	days)					
Loss of Income (LOI):	S\$ (\$ x	days)					
LOR only LOU only		+ LOI [Tick on	ly one]				
GIA/LTA Search	S\$				100 1 00 1	01	
Medical:	S\$	/- m		1) Claim status: Nor	mal/Reject/Private	Settle	
Disbursement:	S\$ S\$	(e.g. Tow/ Indepe	endent)	Report Format:     Survey fee:			
Legal Cost Total:		obal Sum S\$:		J Survey ree.			
FINAL PAYMENT		nfirm with:		Email Call			
Payee 1:		me 1:					
Payee 1: Payee 2: (Strike if N.A.)		me 1:					
Payee 2: (Strike if N.A.) Payee 3: (Strike if N.A.)		me 3:					
7	5.111						

ASS, REC. BY: Sten REF: FCI	
The state of the s	GNMENT
From: Date: 19.3.7020	Veh No: SGA 6488Z Yr Regn: 21/7/15
FIOIII Date.	Type (M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Estimated Cost:	Truck / Trailer or
To Inspect Vehicle No: SGA G488Z	Make: Maz da 5 c.c 1998
Tour & rock 6	Colour Red A/C: Insured / Std / NI / NA
	COLUMN TIP II I I I I I I I I I I I I I I I I
of J7A Tanjong Anjuru	op.iteading 6 1 45 1
Insured:	Eng/No: JM6 CW 1071F0121966
Policy No.	
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: 230pm own way	Modi: Nil / S/Righ / STD A/Rim or
	Tyre Size: F: 205 /55 1/6
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO OF
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. R/Bal. mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. J mm L/Bal. J mm
Est. Repairs: days Res.: Yes or No	D.O.A. 1/3/20 D.O.I. 19/3/29
Lum Sum: % 3 Val.: Yes or No	Survey held at Trans Eyro kars
CA / REV / REP. / 24 HRS Vehicle: IN / OUT	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or Rear LH
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time   Action / Instruction	
MV-56K	
PV-51,140	
MV - 4860	
A	
Date/Time, File Pass to? : Preli. Report	Days Of Repair:
i) : Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
2) Add Fed	
	: Interview (\$) Photos
Report Format :	:Tech. Invs (\$) Others
Lump Sum / I.B.J: (\$)	:Weekend (\$)
	TOTAL

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Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Singapore NRIC	
Owner ID: Vehicle Details	450F	
Vehicle No.:	SGA6488Z	
Vehicle to be Exported:	No	
Intended Deregistration Date:	19 Mar 2020	
Vehicle Make:	MAZDA	
Vehicle Model:	MAZDA5 5-DOOR WAGON 2.0L SP.6EAT SUNROOF	
Primary Colour:	Red	
Manufacturing Year:	2015	
Engine No.:	PE10237358	
Chassis No.:	JM6CW1071F0121966	
Maximum Power Output:	111.0 kW (148 bhp)	
Open Market Value:	\$17,311.00	
Original Registration Date:	21 Jul 2015	
First Registration Date:	21 Jul 2015	
Transfer Count:	0	
Actual ARF Paid: Intended PARF Rebate Details	\$17,311.00	
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	20 Jul 2025	
PARF Rebate Amount: Intended COE Rebate Details	\$12,983.00	
COE Expiry Date:	20 Jul 2025	
COE Category:	E - Open Category	
COE Period(Years):	10	
QP Paid:	\$74,501.00	
COE Rebate Amount:	\$38,157.00	
Total Rebate Amount:	\$51,140.00	

The information contained herein is correct as at 19 Mar 2020

ОК

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