

INS. CASE OWNER:

CC3 / CT1 2000 4>27 / Fp53

LKK:

IDAC:

Surveyor:

Ram

DOI:

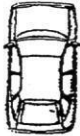
18/3/2020

Date / Time:

18/3/2020

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SKL 6988S

Claim No. :

Name of Insured :

Policy No. :

Insured Tel No. : HP:

Make / Model :

Excess Sec II : S\$

D.O.A : 17/3/2020

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. :

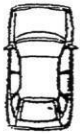
(V/L: YES / NO)

Insured Liability :

%

Final ? Yes / No

SHD 3637C



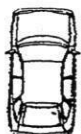
INSRS:

WSP: Comfort Helgn

Tel :

Liability :

RMKS:



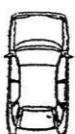
INSRS:

WSP:

Tel :

Liability :

RMKS:



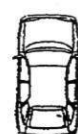
INSRS:

WSP:

Tel :

Liability :

RMKS:



INSRS:

WSP:

Tel :

Liability :

RMKS:

Date/ Time

SHD 3637C : NS/INC 19018315 / R14f352; DDA: 15/10/19
SKL 6988S : NS/INC 20004227 / Fp53; DDA: 17/3/2020

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)

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:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	821R
Vehicle Details	
Vehicle No.:	SHD3637C
Vehicle to be Exported:	No
Intended Deregistration Date:	19 Mar 2020
Vehicle Make:	HYUNDAI
Vehicle Model:	I40 1.7 CRDI F/L AT ABS AIRBAG 4DR
Primary Colour:	Blue
Manufacturing Year:	2016
Engine No.:	D4FDGU651814
Chassis No.:	KMHLB41UMGU093679
Maximum Power Output:	100.0 kW (134 bhp)
Open Market Value:	\$18,899.00
Original Registration Date:	29 Sep 2016
First Registration Date:	29 Sep 2016
Transfer Count:	0
Actual ARF Paid:	\$18,899.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	28 Sep 2024
PARF Rebate Amount:	\$14,174.00
Intended COE Rebate Details	
COE Expiry Date:	28 Sep 2024
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$42,672.00
COE Rebate Amount:	\$24,136.00
Total Rebate Amount:	\$38,310.00
Message	
Please note that the 8-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 19 Mar 2020

OK