

INS. CASE OWNER:

CC3/QBE20004406/Qka3

LKK:

IDAC:

ASSIGNMENT

Surveyor: SUN PIN

DOI: 23/03/2020

Date / Time : 23/03/2020

Registered in Merimen: _____

Pre-assign / CCU / FTE



Insured Vehicle No. : SKJ 6052C

Claim No. : _____

Name of Insured : _____

Policy No. : _____

Insured Tel No. : _____ HP: _____

Make / Model : _____

Excess Sec II :S\$ _____ D.O.A : 19/03/2020

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

SHF 206Y

INSRS:
WSP: SMRT
Tel : AUTOMOTIVE

Liability : _____

RMKS: _____

INSRS:
WSP: _____
Tel : _____

Liability : _____

RMKS: _____

INSRS:
WSP: _____
Tel : _____

Liability : _____

RMKS: _____

INSRS:
WSP: _____
Tel : _____

Liability : _____

RMKS: _____

Date/ Time			
	SHF 206Y- CC3/AXA14009242/K1rb3c3 NS/INC12023839/R1qn	13/05/2014 10/12/2012	STAGE DATE / PIC
	SKJ 6052C - X		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: _____		Post-Repair Photos: <input type="checkbox"/> <input type="checkbox"/>	
		Others: <input type="checkbox"/> <input type="checkbox"/>	
FINALIZATION Date/Time: _____ Confirm with: _____		Confirm by: _____	
Repair Cost: S\$ _____	(_____ days) Reduction: _____ %	Email <input type="checkbox"/>	Call <input type="checkbox"/>
FINAL SETTLEMENT Date/Time: _____ Confirm with: _____		Email <input type="checkbox"/> Call <input type="checkbox"/>	
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 <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\$ _____		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 <input type="checkbox"/> Call <input type="checkbox"/>	
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:	369K
Vehicle Details	
Vehicle No.:	SHF206Y
Vehicle to be Exported:	No
Intended Deregistration Date:	24 Mar 2020
Vehicle Make:	TOYOTA
Vehicle Model:	PRIUS HYBRID 1.8 CVT
Primary Colour:	Maroon
Manufacturing Year:	2017
Engine No.:	2ZR8256629
Chassis No.:	JTDKB3FU403576316
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$29,007.00
Original Registration Date:	14 Dec 2017
First Registration Date:	14 Dec 2017
Transfer Count:	0
Actual ARF Paid:	\$5,000.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	13 Dec 2025
PARF Rebate Amount:	\$3,750.00
Intended COE Rebate Details	
COE Expiry Date:	13 Dec 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$34,159.00
COE Rebate Amount:	\$24,416.00
Total Rebate Amount:	\$28,166.00
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 24 Mar 2020

OK