

15/5/2010

KHONG Lynn
INS. CASE OWNER: 68804892

CC4/ASM20004464/ Kga3

LKK:
IDAC: 165809

ASSIGNMENT

Surveyor:

DOI:

Date / Time : 24/03/2020

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SJZ 8847R
 Name of Insured : JAHAN SHAH
 Insured Tel No. : HP: 91571932
 Excess Sec II :S\$ D.O.A : 21/03/2020
 Is driver the owner? (YES / NO) Nature of Accident :

Claim No. : S0M02JQW
 Policy No. : GA471125
 Make / Model : TOYOTA CAMRY 2.4
 Place of Accident :

67x

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

SGL 8842M



INSRS:
WSP: Antman House
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:



INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	STAGE	DATE / PIC
SGL 8842M -	CC4/AIG07000095/KCs ; 13/07/2007	Non-Reporting ltr (1st):
	CF/AIG07000060/Ey ; 13/07/2007	Non-Reporting ltr (2nd):
	CS/INC10011243/Gbg1 ; 20/02/2010	Non-Reporting ltr (Final):
SJZ 8847R - X	Notification ltr (if non-pickup):	
- Pending TP GIA.	Call OI:	
	After call ltr to OI:	
OINR. To send out first letter. File pass to Su Li.	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\$		1) Claim status: Normal/Reject/Private Settle
Medical: S\$		2) Report Format:
Disbursement: S\$	(e.g. Tow/ Independent)	3) Survey fee:
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:

REF:

AAA/

Kenneth

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: 847k

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 07 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SGL 8842mYr Regn: 10, 15

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

Truck / Traller or _____

Make: Honda ShuttleC.C. 1496Colour: M. P. White

A/C: Insured / Std / NI / NA

Sp. Reading: 78263

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: GK13

1000128

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD / A/Rim or

Tyre Size: F: 185/55R16

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

Front

Rear

R/Bal. 6 mmR/Bal. 7 mmL/Bal. 6 mmL/Bal. 7 mmD.O.A. 21/3/20D.O.A. 25/3/2020

Survey held at _____

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

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee

Transportation

S + RS \$

Fees

Others

TOTAL

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech Invs (\$

☐

: Weekend (\$

Report Format :

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

< > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	550J
Vehicle Details	
Vehicle No.:	SGL8842M
Vehicle to be Exported:	No
Intended Deregistration Date:	26 Mar 2020
Vehicle Make:	HONDA
Vehicle Model:	SHUTTLE 1.5G A
Primary Colour:	White
Manufacturing Year:	2015
Engine No.:	L15B3530192
Chassis No.:	GK81000128
Maximum Power Output:	97.0 kW (130 bhp)
Open Market Value:	\$16,414.00
Original Registration Date:	19 Oct 2015
First Registration Date:	19 Oct 2015
Transfer Count:	1
Actual ARF Paid:	\$6,414.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	18 Oct 2025
PARF Rebate Amount:	\$4,810.00
Intended COE Rebate Details	
COE Expiry Date:	18 Oct 2025
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$57,498.00
COE Rebate Amount:	\$31,966.00
Total Rebate Amount:	\$36,776.00

The information contained herein is correct as at 26 Mar 2020

OK