Surveyor:

LALITHA

CC4/III20001691/Kga3

LKK: IDAC:

ASS	FERN	B. TW.	E W 21	B. TFE
4		TO DO	B B4	

KENNETH

DOI: 29/01/2020

29/01/2020 Date / Time :

31/01/2020 Registered in Merimen:

Pre-assign / CCU / FTE

INS. CASE OWNER:



SLB 4459G Insured Vehicle No.

Claim No.

X

Name of Insured

LAM SENG HANG CO PTE LTD

Policy No.

D18MPC0000807-01 KIA CERATO FORTE KOUP-1.6 (A)

Insured Tel No. Excess Sec II :S\$

D.O.A: 20/01/2020 18:45

SLE TOWARDS BKE

Is driver the owner?

(YES/NO)

Nature of Accident:

Place of Accident:

If NO, Driver Name / Age: TAI KEONG TATT PAUL Driver Tel No.:

Make / Model :

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

SHD 9692C

+65-98385847

(V/L: YES / NO)

Insured Liability:

Final? Yes/No

Liability:



INSRS: WSP: Tel: Liability:



INSRS: WSP: Tel: Liability: DMKC.



INSRS: WSP: Tel: Liability:

Date/ Time				
Date/ Time	SLB 4459G - NA/EQI18013	286/74: DOA: 20 07 18	STAGE	DATE/PIC
		771/Kqd3n2; DOA : 19.08.19	Non-Reporting ltr (1st):	Dillorito
	- CC3/III180222	91/Kga3q2; DOA: 06.12.18 1037/Kha3q2; DOA: 11.06.16	Non-Reporting ltr (2nd):	
	- CC3/AIG16011	Non-Reporting ltr (Final):		
			Notification ltr (if non-pickup):	
			Call OI:	
			After call ltr to OI:	
			Documentation Check List: H	andler Typist
			Notification ltr (if non-pickup)	
			After call ltr to OI:	
			Authorisation To Act:	
04/09/2020	10 DAYS NOTICE SEND TP.		Release Voucher:	
			Final Repair Bill:	
17/09/2020	NO FURTHER RESPONSE/DEV	/ELOPMENT FROM TP. SUBMIT WP.	Car Rental Invoice:	
	ADMIN TO CLOSE	VELOT IVILIAT FIXON IT . SOCIVIT VVF.	Towing Invoice	
			LTA / GIA :	
			Medical Bill:	
			PIR:	
			Mandate/Reject Instruction:	
			LOD	
			Payment Breakdown Form:	
PRELIMINARY ADVICE	Date/Time:	Sent By:	Post-Repair Photos:	
REEMINITARY			Others:	
FINALIZATION	Date/Time:	Confirm with:	Confirm by:	
Repair Cost: P/P	S\$ 512.23 (0.5 days	Reduction: 23,871.05 % 97	Email	Call
FINAL SETTLEMENT	Date/Time: 06/05/2021 Confirm		Email Call	
	Editor a milet. Goldol ZoZ.	i) BOLA S/N No. : 27	If NO or B 28, Ass. Lia:	
Final Liability: Repair Cost:		GST		
Loss of Rental (LOR):	S\$ 170.10 (1.5 days			
Loss of Use (LOU):	S\$ (\$ x day	·		
Loss of Income (LOI):	S\$ 60.00 (\$ 40 x 1.5 day			
LOR only LOU only	LOR + LOU LOR + LO			
GIA/LTA Search	S\$ 7.45			
	S\$ 7.45		1) Claim status: Normal/Reject	t/Private Settle
Medical:	S\$	(e.g. Tow/ Independent)	2) Report Format: TP	
Disbursement:	S\$	(-0.	3) Survey fee:	\$150.00
Legal Cost	I POST CONTRACTOR OF THE POST CONTRACTOR OF T	Sum S\$: 750.00	,	
Total: FINAL PAYMENT	Date/Time: Confirm	D. 10111 1- 3 7	Email Call	
	S\$ 750.00 Name 1		ELTD	
Payee 1:	50			
Payee 2: (Strike if N.A.)	54			
Payee 3: (Strike if N.A.)	S\$ Name 3			

ASS. REC. BY:	WM 19
	SIGNMENT
From: Date:	Veh No: SIAD 9682 C Yr Regn: 06, 19
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi) Prime Mover /
OD/TP/WS/TP RES/OD RES/EVA/INV/MV	Truck / Trailer or
To Inspect Vehicle No:	Make: Toy Poris c.c 1798
at Workshop m/s Trans Cab	Colour M.P. White 1 Red A/C: Insured / Std / NI / NA
of	Sp.Reading : T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	CNO: JTD16B31=U8.03082103
Claims No.	Gen. Cond: Sood) Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Ino der/ Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inerder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: NII / S/Rim / STDA/Rim or
	Tyre Size: F: 195/65215
(Policy Condition)	
Remark: The veh had commenced its N/S O/S	R:
repair at the time of inspection.	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YORO or
Bal. or Market Value:	
IDAC Accident Rport: Consistent? : Yes or No	Front Rear Z
GIA / PR Seen: Consistent? : Yes or No	Man mm
Est. Repairs: // Z days Res.: Yes or No	D.O.A. 20/1/20 D.O.I. 29/1/202
Lum Sum: 18-1 % 3 Val.: Yes or No	Survey held at
CA / REV / REP. / 24 HRS Vehicle: IN / OUT	Des. of Damages : Frt Rear' O/S N/S U/C Rooftop or
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	The state of the control of the cont
	/
Date/Time File Date In 2	
Date/Time, File Pass to? : Prell. Report	Days Of Repair:
1) : Final Report	Resurvey No. of Trip: Survey Fee:
Oute/Time, File Return to?	Transportation:
Add Fee	
	: Interview (\$) Fixetos
Report Format :	Tech Invs (\$) Others
Lump Sum / I.B.I: (S	Weekend (\$
	TOTAL

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

ehicle Owner Particulars		
Owner ID Type:	Company	
Owner ID: /ehicle Details	878K	
/ehicle No.:	SHD9692C	
/ehicle to be Exported:	Yes	
ntended Deregistration Date:	21 Jan 2020	
/ehicle Make:	TOYOTA	
√ehicle Model:	PRIUS 5DR HATCHBACK (AUTO)	
Primary Colour:	Red	
Manufacturing Year:	2018	
Engine No.:	2ZR2C35960	
Chassis No.:	JTDKB3FU803082105	
Maximum Power Output:	90.0 kW (120 bhp)	
Open Market Value:	\$26,605.00	
Original Registration Date:	27 Jun 2019	
First Registration Date:	27 Jun 2019	
Transfer Count:	0	
Actual ARF Paid: Intended PARF Rebate Details	\$14,247.00	
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	26 Jun 2027	
PARF Rebate Amount: Intended COE Rebate Details	\$10,685.00	
COE Expiry Date:	26 Jun 2027	
COE Category:	A - Car up to 1600cc & 97kW (130bhp)	
COE Period(Years):	8	
PQP Paid:	\$23,872.00	
COE Rebate Amount:	\$19,097.00	
Total Rebate Amount: Message	\$29,782.00	

The information contained herein is correct as at 21 Jan 2020 $\,$

OK