

INS. CASE OWNER:

TEO Kitty

CC4/ASM19014792/ K pa3

LKK:

IDAC:

132929

Surveyor:

Kenneth

DOI:

ASSIGNMENT

21/8/2019

Date / Time : 22/08/2019

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. : SLD 851Y

Claim No. : S9M01XZF

Name of Insured : HITACHI CAPITAL ASIA PACIFIC PTE LTD

Policy No. :

Insured Tel No. : HP:

Make / Model :

Excess Sec II : S\$ D.O.A : 21/08/2019

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

SJR 5258C

INSRS:
WSP: CHENG HOE
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SJR 5258C- X	SLD 851Y- X	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)	<input type="checkbox"/>
			After call ltr to OI:	<input type="checkbox"/>
			Authorisation To Act:	<input type="checkbox"/>
			Release Voucher:	<input type="checkbox"/>
			Final Repair Bill:	<input type="checkbox"/>
			Car Rental Invoice:	<input type="checkbox"/>
			Towing Invoice	<input type="checkbox"/>
			LTA / GIA :	<input type="checkbox"/>
			Medical Bill:	<input type="checkbox"/>
			PIR:	<input type="checkbox"/>
			Mandate/Reject Instruction:	<input type="checkbox"/>
			LOD	<input type="checkbox"/>
			Payment Breakdown Form:	<input type="checkbox"/>
			Post-Repair Photos:	<input type="checkbox"/>
			Others:	<input type="checkbox"/>

08/05/2020

Pls refer to Views for details.

*No response from TP

*Submit WP report to AXA

31/08/2021

Pls refer to VIEWS for details.

PRELIMINARY ADVICE Date/Time:

Sent By:

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost: L/sum

S\$ 6,500.00

(10

days) Reduction:

25

%

Email ☐Call ☐

FINAL SETTLEMENT

Date/Time: 31/08/2021

Confirm with June

Email ☒Call ☐

Final Liability:

%

100

(Agreed / Assessed) BOLA S/N No. :

27

If NO or B 28, Ass. Lia :

Repair Cost: w/GST

S\$ 6,955.00

Loss of Rental (LOR):

S\$ 1,200.00

(12

days) x \$100

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\$ 8.00

Medical:

S\$

Disbursement:

S\$

(e.g. Tow/ Independent)

Legal Cost

S\$

1) Claim status: Normal/Reject/Private Settle/TP

2) Report Format: TP

3) Survey fee: \$200.00

Total:

S\$ 8,163.00

Global Sum S\$:

(\$350.00-\$250.00=\$100.00)

FINAL PAYMENT

Date/Time:

Confirm with:

Email ☒Call ☐

Payee 1:

S\$ 8,163.00

Name 1:

CHENG HOE MOTOR PL

Payee 2: (Strike if N.A.)

S\$

Name 2:

Payee 3: (Strike if N.A.)

S\$

Name 3:

ASS. REC. BY:

REF:

ALA

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:

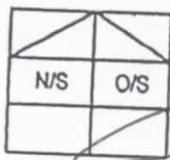
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.



Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

10

days

Res.:

Yes or No

Lum Sum:

20

%

3 Val.:

Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

1

File pass to

Submit L/sum \$6,400.00 (Red \$2,232.12// 26%) - excluded check items \$211.88

31/08/2021

Finalised L/sum \$6,500.00 (Red \$2,132.12 // 25%)

Date/Time, File Pass to?

☐

: Prell. Report

1)

Date/Time, File Return to?

☐

: Final Report

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

S - RS. SI

FINDS

Others

TOTAL

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

Tech Invs (\$

☐

Weekend (\$

Report Format :

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

PARF/COE Rebate Enquiry

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	281M
Vehicle Details	
Vehicle No.:	SJR5258C
Vehicle to be Exported:	No
Intended Deregistration Date:	22 Aug 2019
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA ALTIS 1.6 AUTO
Primary Colour:	Silver
Manufacturing Year:	2009
Engine No.:	3ZZ4902492
Chassis No.:	MR053ZEE106147765
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$17,500.00
Original Registration Date:	26 Jun 2009
First Registration Date:	26 Jun 2009
Transfer Count:	1
Actual ARF Paid:	\$17,500.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	31 May 2029
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
PQP Paid:	\$27,886.00
COE Rebate Amount:	\$27,256.00
Total Rebate Amount:	\$27,256.00

The information contained herein is correct as at 22 Aug 2019

OK