

ASSIGNMENT

From:

Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

AP 60E

at Workshop m/s

Evke

of

Insured:

1/L 7669R

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:

\$13k 12k

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

LTA 376;

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

AP 60E

Yr Regn:

20/11/15Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

TRACER

Make:

Yamaha MT-09 ABS 847

Colour:

BlueA/C: Insured / Std / NI / NA

Sp. Reading

T/Radio: Insured / Std / NI / NA

Eng/No:

None

C/No:

J1ARN29K00000522Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt or affectedBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F: 120/70ZR17R: 190/55ZR17

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal.

8

mm

R/Bal.

8

mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

19/03/22

D.O.I.

06/05/22

Survey held at

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop orLft, n/s Body &The U/C Chassis frame Body Structure affected due to collision.

Date / Time

Action / Instruction

TOTAL LOSS LTA 376 06-05-22 IS \$ 2299Nett \$10701

25/5/22 owner asking MV \$15k. offer MR Teo from Evke MV \$12k. agree. nett \$ 9701 repair cost more than \$15k. chassis frame affected unsafe for repair submit TOTAL LOSS

MV: 12,000.00(EST)LTA REBATE: \$2,299.00(EST)NV: \$9,701.00(EST)

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

___ S + RS ___ SI

Photos

Others

TOTAL

Report Format :

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

Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC

Owner ID: 376I

Vehicle Details

Vehicle No.: AP60E

Vehicle to be Exported: No

Intended Deregistration Date: 06 May 2022

Vehicle Make: YAMAHA

Vehicle Model: MT-09 ABS TRACER

Primary Colour: Silver

Manufacturing Year: 2015

Engine No.: N701E045330

Chassis No.: JYARN29K000000522

Maximum Power Output: -

Open Market Value: \$10,222.00

Original Registration Date: 20 Nov 2015

First Registration Date: 20 Nov 2015

Transfer Count: 0

Actual ARF Paid: \$1,534.00

Intended PARF Rebate Details

PARF Eligibility: No

PARF Eligibility Expiry Date: -

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 19 Nov 2025

COE Category: D - Motorcycle

COE Period(Years): 10

QP Paid: \$6,502.00

COE Rebate Amount: \$2,299.00

Total Rebate Amount: \$2,299.00

The information contained herein is correct as at 06 May 2022

mv 12/6

OK

EROFIA MOTOR TRADING PTE LTD (201202259N)

No 1 Kaki Bukit Avenue 6 #02-62 AutoBay @ Kaki Bukit Singapore 417883

Tel : 67527740 Fax : 67528669

E-mail: erofia@singnet.com.sg

AXIA

Name : Muhammad Imran Bin Abdul
Hamid (91993357)

Accident Date : 19-Mar-22

Vehicle No : AP60E

Vehicle Model : Yamaha MT-09 ABS
Tracer

Estimate Repair Cost

Qty	Description List Items	Amount S(\$)
	Total loss at market value	\$ 17,000.00
	To provide towing service (LOD) S\$80.00	
	Estimated cost of repair S\$28,000.00	
		\$ 17,000.00

Singapore Dollars: Seventeen Thousand only

EROFIA MOTOR TRADING PTE LTD

Not Authorized
Lulu
6/5/22
TOTAL LOSS?

LKK Auto Consultants hence notify
the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and
is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date: