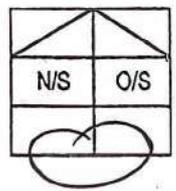


ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: SN6 1169M
 at Workshop m/s SK GARAGE
 of 5, SUON LEE ST #01-34
 Insured: YN 5241T LPC
 Policy No. _____
 Claims No. 22/23/23/VC05/026926
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

Veh No: SN6 1169M Yr Regn: 2009
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: TOYOTA VOXY c.c. 1986
 Colour: BLACK A/C: Insured / Std / NI / NA
 Sp. Reading: 258308 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: ZRR 700147403
 Gen. Cond: Good / Fail / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or _____
 Brake: Inorder / Jammed / Leaked / Burnt or _____
 Modi: Nil / S/Rim / STD A/Rim or _____
 Tyre Size: F: 215/45R17
 R: "

(Policy Condition)
 Remark: The veh had commenced its
 repair at the time of inspection.



BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKE or _____
 Front 6 mm Rear 6 mm
 R/Bal. 6 mm R/Bal. 6 mm
 L/Bal. 6 mm L/Bal. 6 mm
 D.O.A. 01/02/23 D.O.I. 07/02/23
 Survey held at SK GARAGE

Bal. or Market Value: _____
 IDAC Accident Rport: 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
 Date: _____ Person Contacted: _____ Vehicle: IN / OUT

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
	<u>REPAIR LIMIT -</u>
	<u>ESTIMATE RANGE OF REPAIR / NO. OF DAYS -</u>

30/5/23 Submit LS \$4600 (red 1050, 19%)

Date/Time, File Pass to? : Prell. Report
 : Final Report
 Date/Time, File Return to?
 2) 30/5/23-typist
 Report Format : _____
 Lump Sum / I.B.I: (\$ _____)

Days Of Repair: 4
 Resurvey No. of Trip: _____
 Survey Fee: _____
 Transportation: _____
 Add Fee: : Site Insp (\$ _____)
 : Interview (\$ _____)
 : Tech. Invs (\$ _____)
 : Weekend (\$ _____)
 Others: _____
 TOTAL

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SNG 1169M

at Workshop m/s SK GARAGE

of S, SOON LET ST #01-34

Insured: LPC

Policy No. _____

Claims No. _____

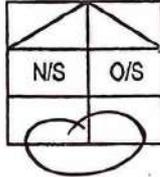
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value: 70K

IDAC Accident Rport: 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

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SNG 1169M Yr Regn: 2009 / FEB

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

Truck / Trailer or _____

Make: TOYOTA VOXY 200XA c.c 1986

Colour: BLACK A/C: Insured / Std / NI / NA

Sp. Reading: 258308 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: ZRR 700147403

Gen. Cond: Good / Fail / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215/45R17

R: _____

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

TOYO YOKE or

Front _____ Rear _____

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. 01/02/23 D.O.I. 07/02/23

Survey held at SK GARAGE

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

REPAIR LIMIT - 59K

ESTIMATE RANGE OF REPAIR (NO. OF DAYS - (3K-4K) / 4 days

Date/Time, File Pass to? : Prel. Report

1) : Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee: : Site Insp (\$) S + RS SI

: Interview (\$) Photos

: Tech. Invs (\$) Others

: Weekend (\$)

Report Format :

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

TOTAL

Empty box for additional notes or calculations.

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	603F
Vehicle Details	
Vehicle No.:	SNG1169M
Vehicle to be Exported:	No
Intended Deregistration Date:	26 Feb 2023
Vehicle Make:	TOYOTA
Vehicle Model:	VOXY 2.0X A
Primary Colour:	Black
Manufacturing Year:	2008
Engine No.:	3ZR4200638
Chassis No.:	ZRR700147403
Maximum Power Output:	105.0 kW (140 bhp)
Open Market Value:	\$21,545.00
Original Registration Date:	12 Feb 2009
First Registration Date:	12 Feb 2009
Transfer Count:	2
Actual ARF Paid:	\$21,545.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	31 Jan 2029
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
PQP Paid:	\$31,335.00
COE Rebate Amount:	\$18,581.00
Total Rebate Amount:	\$18,581.00

Toyota Voxy 2.0A X (COE till 12/2028)

Overview

[Financial](#)[Accessories](#)[Similar](#)[Research](#)[Photos](#)[Map](#)

Price	\$78,800		
Depreciation ⓘ	\$13,470 /yr	Reg Date	23-Jan-2009 (5yrs 10mths 5days COE left)
Mileage	155,000 km (11k /yr)	Manufactured ⓘ	2008
Road Tax ⓘ	\$1,794 /yr	Transmission	Auto
Dereg Value ⓘ	\$18,456 as of today (change)	OMV ⓘ	\$27,378
COE ⓘ	\$31,553	ARF ⓘ	\$16,821
Engine Cap	1,986 cc	Power	105.0 kW (140 bhp)
Curb Weight ⓘ	1,550 kg	No. of Owners ⓘ	5
Type of Vehicle	MPV		