

REF: CS/LIP24080201/Avh3

ASSIGNMENT

From: _____ Date: _____
 Estin: _____
 OD / TP RES / TP RES / OD RES / EVA / INV / MV
 To in _____ Vehicle No: _____
 at _____
 of _____
 Insured: **SNA 2780Y**
 Policy No: _____
 Claim's No: **BVS24/0565**
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____
 (Policy Condition)

Veh No: **SGY800T** Yr Regn: **2017, May**
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: **Honda Shuttle** CC: **1496**
 Colour: **Grey** A/C: Insured / Std / NI / NA
 Sp. Reading: **83905** T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: **GK81004117**
 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: **185/60R15**
 R: **185/60R15**

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

N/S	O/S

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

Bal. or Market Value: _____
 IDAC Accident Report: _____ 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

Front _____ Rear _____
 R/Bal. 06 mm R/Bal. 06 mm
 L/Bal. 06 mm L/Bal. 06 mm
 D.O.A. **8/8/2024** D.O.I. 14/08/24
 Survey held at **YSK**

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
7/11/24	<u>TP Liberty</u> Adrian confirmed LS \$4500 (Red 6445.28, 58%) <u>COE Expiry</u>
	MV: <u>42K</u> PV: <u>17.4K</u> Nett: <u>24.6K</u> Estimate given during: Yes () 1st Survey: No ()

1926

Date/Time, File Pass to? : Prol. Report
 : Final Report

Days Of Repair: **6**
 Resurvey No. of Trip: _____

Date/Time, File Return to? 1) _____
 2) _____

Add Fee: : Site Insp (\$) _____
 : Interview (\$) _____
 : Tech. Inve (\$) _____

Survey Fee: _____
 Transportation: _____
 S + RS: _____ \$
 Photos _____
 Others _____

Report Format: _____
