

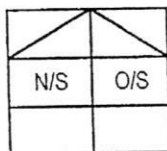
ASS. REC. BY: **Steve**

**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: 2 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: **SHA 5187L** Yr Regn: **27/02/2019**  
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
Truck / Trailer or \_\_\_\_\_  
Make: **Hyundai Ioniq** C.C. **1580**  
Colour **Blue** A/C: Insured / Std / NI / NA  
Sp. Reading **690543** T/Radio: Insured / Std / NI / NA  
Eng/No: \_\_\_\_\_  
C/No: **KMHC851CVKU140655**  
Gen. Cond: Good / Fair / 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: **195/65R15**  
R: \_\_\_\_\_  
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or **DAVANTI**  
Front \_\_\_\_\_ Rear \_\_\_\_\_  
R/Bal. 5 mm R/Bal. 5 mm  
L/Bal. 5 mm L/Bal. 5 mm  
D.O.A. **12/08/24** D.O.I. **15/08/24**  
Survey held at **Comfortdelgro**  
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                                   |
|-------------|--------------------------------------------------------|
|             | Steve finalised LS \$1150, 2 days (Red \$1246.76, 52%) |
|             |                                                        |
|             |                                                        |
|             |                                                        |
|             |                                                        |
|             |                                                        |
|             |                                                        |
|             |                                                        |
|             |                                                        |

Date/Time, File Pass to?

☐ : Preli. Report  
☐ : Final Report

1) 19/08 Typist

Date/Time, File Return to?

2)

Rep. Format : **MER-TP**

Lump Sum **1150**

Days Of Repair: **2**

Resurvey No. of Trip: **1**

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

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL