

ASSIGNMENT

Front: _____ Date: _____
 Estin: Estimate
 OD / TP RES / OD RES / EVA / INV / MV
 To in Vehicle No: _____
 at W/O m/s
 of _____
 Insured: _____
 Policy No: _____
 Claims No: _____
 Sum INS W/O Excess: _____
 (Client's Record)
 Make of Vek: _____

(Policy Condition)

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

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

Veh No: SNF6017R Yr Regn: 2006 May
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Honda Stepwagon c.d. 1998
 Colour: Brown A/C: Insured / Std / NI / NA
 Sp. Reading: 191334 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: R611040870
 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: 205/60R16
 R: 205/60R16

BS / DUN / EXNOVA / GY / FS / IIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Ariso

Front	Rear
R/Bal. <u>06</u> mm	R/Bal. <u>06</u> mm
L/Bal. <u>06</u> mm	L/Bal. <u>06</u> mm
D.O.A. _____	D.O.I. <u>20/08/24</u>

Survey held at Hua Meng

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>TP Sampo</u>
	COE Expiry: <u>22/05/2026</u>
	Estimate given during: Yes () 1st Survey: No (✓)
	MV: <u>21K</u> (Depreciation @ <u>4K</u> x 1.75yr
	PV: <u>8.1K</u> <u>≈ 21K</u>)
	Nett: <u>12.9K</u>

Date/Time, File Pass to?

☐ : Preli. Report

Days Of Repair: _____

1)

☐ : Final Report

Resurvey No. of Trip: _____

Date/Time, File Return to?

2)

Add Fee: ☐ : Site Insp (\$ _____)

Survey Fee: _____

Transportation: _____

Photos

Others

Report Format: _____

Report Form / R.P. / C