

REF: CS/INQ4080448/Agh3

ASSIGNMENT

From: _____ Date: _____
 Estin: Post
 OD / PHS / TP RES / OD RES / EVA / INV / MV
 To in _____ Vehicle No: _____
 at _____
 of _____
 Insured: _____
 Policy No: _____
 Claims No: _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____
 (Policy Condition)

Veh No: SNR657U Yr Regn: 2024, May
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: Toyota Noah Hybrid C.D. 1797
 Colour: White A/C: Insured / Std / NI / NA
 Sp. Reading: 10031 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: ZWR900160518
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or _____
 Brake: In order / Jammed / Leaked / Burnt or _____
 Mod: Nil / SRim / STD A/Rim or _____
 Tyre Size: F: 205/55R17
 R: 205/55R17

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

N/S	O/S

BS / DUN / EXNOVA / GY / FS / IZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or _____
 Front _____ Rear _____
 R/Bal. 06 mm R/Bal. 06 mm
 L/Bal. 06 mm L/Bal. 06 mm
 D.O.A. _____ D.O.I. 27/08/24
 Survey held at HD Reflect
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or _____

Bal. or Market Value: _____
 IDAC Accident Report: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repair: 6 days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____ Vehicle: IN / OUT

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>TP INC</u>
	LS \$7600, 6 days (Red \$22585.25, 75%)
	MV : _____
	PV : _____
	Nett: _____

COE Expiry : _____
 Estimate given during : Yes
 1st Survey : No

1308

Date/Time, File Pass to? Preli. Report
 Final Report
 1) 19/11 Typist
 Date/Time, File Return to?
 2) _____
 Report Format: TP

Days Of Repair: 6
 Resurvey No. of Trip: 2
 Add Fee: Site Insp (\$)
 Interview (\$)
 Tech. Inve (\$)

Survey Fee:

Transportation:	_____
3 + RS. SI	_____
Photos	_____
Others	_____