

ASS. REC. BY:

REF: CS/001240804.74/Rgp3

7957

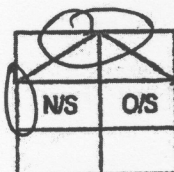
ASSIGNMENT

08-2025/200

From: _____ Date: _____
 Estimated Cost: _____
 OD TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: FBE 5816E
 at Workshop m/s HWA CHIN
 of BUKIT BATOK
 Insured: UOI
 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: 5K
 IDAC Accident Rpt: Consistent? : Yes or No
 GIA / PR Seen: Consistent? : Yes or No
 Est. Repairs: 4 days Res.: Yes or No
 Turn Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No: FBE 5816E Yr Regn: 2010 / Jun
 Type: M/Car / M/Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: YAMAHA / YZF-R15 c.c. 150
 Colour: BLUE AC: Insured / Std / Nil / NA
 Sp. Reading: _____ T/Radio: Insured / Std / Nil / NA
 Eng/No: _____
 C/No: ME120P01192020602
 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: 90/80-17
 R: 120/70-17
 BS / DUN / EXNOVA / GY / FS / LZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or
 Front 3 mm Rear 3 mm
 R/Bal. mm L/Bal. mm
 D.O.A. 17/08/24 D.O.I. 28/08/24
 Survey held at BUKIT BATOK
 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 - 4.5K

Rasul finalised LS \$2450, 4 days (Red \$2650, 52%)

Date/Time, File Pass to?

1) 20/01 Typist

Date/Time, File Return to?

2)

Report Format : TP

Lump Sum / L.B. in (\$) 2450

Days Of Repair: 4

Resurvey No. of Trip: 2

Survey Fee:

Transportation:

S + RS \$

Photos

Others

Add Fee: ☐ Site Insp (\$

☐ Interview (\$

☐ Tech. Invs (\$

☐ Weekend (\$

TOTAL

210
60
80+80
180
615

SP 23/1/25