

(08/11/08)

ASS. REC. BY: E.H.

REF:

CS/LPC24090028 / JVH3**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: _____

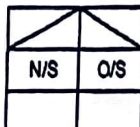
Policy No. _____

Claims No. 23/24/24/VC06/029746Sum Insured: _____ Excess: NIL

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.Bal. or Market Value: \$48,000

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: XD2192 Yr Regn: 12/1/2008Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: Isuzu CY252L c.c. 1561Colour: White A/C: Insured / Std / NI / NASp.Reading: N.A T/Radio: Insured / Std / NI / NAEng/No: 6W140724C/No: JALCY252LY1000005Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt or _____Brake: Inorder / Jammed / Leaked / Burnt or _____Mod: Nil / S/Rim / STD A/Rim or _____Tyre Size: F: N.A (Burnt)R: 295/80/R22.5

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or Giti

Front: _____ Rear: _____

R/Bal. N.A mm R/Bal. 5 mmL/Bal. N.A mm L/Bal. 6 mmD.O.A. 21/8/24 D.O.I. 3/9/2024Survey held at HMP Lin huan engineering worksDes. of Damages: Frt / Rear / O/S / N/S / U/C / Roof or

The cause of fire due to electrical short circuit

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

Date / Time	Action / Instruction
6/9/24	Submit extensive total loss-mv:\$48,000 (est) lta: \$20,712 nv:\$27,288
	<u>Uneconomical to repair recommended to total loss</u>

Date/Time, File Pass to?

☐ : Prel. Report

1)

Date/Time, File Return to?

☐ : Final Report

2)

Report Format :

Lump Sum / I.B.I: (\$ _____)

Days Of Repair: _____

Resurvey No. of Trip: _____

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

Investigation - \$550

Survey Fee:

Transportation:

S + RS SI

Photos

Others SCDF

TOTAL

170