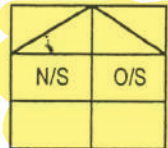


ASSIGNMENT

From: **Sherwin** Date: **6/9/2024**
 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: **3100**
 (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: _____ 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: **GBK 6307U** Yr Regn: **SEP 2020**
 Type: M.Car / M.Cycle / Bus / **Van** / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: **Nissan NV200 1.6A DX** c.c **1,597**
 Colour **White** A/C: Insured **Std** / NI / NA
 Sp.Reading **NIL** T/Radio: Insured **Std** / NI / NA
 Eng/No: **HR16175277D**
 C/No: **VM20160428**
 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: **175/70R14**
 R: **175/70R14**

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or **Kapsen**
 Front Rear
 R/Bal. **NIL** mm R/Bal. **NIL** mm
 L/Bal. **NIL** mm L/Bal. **4mm** mm
 D.O.A. **2/8/2024** D.O.I. **6/9/2024**
 Survey held at **MTM Perofrmance Garage (Toh Guan)**
 Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
 Whole vehicle totally burnt by the fire
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	MV- 57K
	PARF-15,123K
	NL- 41,877K.
19/09/24	Submit Extensive Total Loss report.
	Investigation \$550/-

Date/Time, File Pass to? ☐ : Preli. Report
☐ : Final Report

1) 19/09 Typist
 Date/Time, File Return to?

2)

Days Of Repair: _____
 Resurvey No. of Trip: _____

Report Format : **MER-OD-TL/E**
 Lump Sum / I.B.I: (\$ _____)

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

Survey Fee: _____
 Transportation: _____
 Photos _____
 Others _____
 TOTAL _____