

ASS. REC. BY: Steve

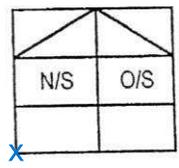
REF:

CTI (CS/CTI24090131/Enh3e2)

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. _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

Veh No: SNJ 1053Y Yr Regn: 21 Aug 2020
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or _____
 Make: TOYOTA CAMRY C.C. 2487
 Colour Silver A/C: Insured / Std / NI / NA
 Sp. Reading 60719 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: MR2B63HK904004306
 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: 235/45ZR18
 R: "
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or Falken
 Front Rear
 R/Bal. 5 mm R/Bal. 5 mm
 L/Bal. 5 mm L/Bal. 5 mm
 D.O.A. 13/06/24 D.O.I. 09/09/24
 Survey held at Mycar consultant
 Des. of Damages: Frnt / Rear / O/S / N/S / U/C / Rooftop or
Rear LH
 The U/C / Chassis frame / Body Structure affected due to collision.



(Policy Condition)
 Remark: The veh had commenced its repair at the time of inspection.

Bal. or Market Value: _____
 IDAC Accident Rport: _____ 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

Date / Time	Action / Instruction
	<u>MV - \$120k</u>
	<u>Steve finalize \$2200.00 (L/S, before GST). 3 days.</u>
	<u>(red, \$6063.78, 73%)</u>

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

Days Of Repair: 3

Resurvey No. of Trip: _____

Survey Fee:	
Transportation:	
S + RS. SI	
Photos	
Others	
TOTAL	

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

1) Date/Time, File Return to?
 2) _____

Report Format: _____
 Lump Sum / L.S. (\$) _____