

ASS. REC. BY:

REF:

SMR/CS3/SMR 24090207/Knp3

Kenneth

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: \_\_\_\_\_

(Policy Condition)

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

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
N/S	O/S
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Bal. or Market Value: 78000

IDAC Accident Rpt: \_\_\_\_\_ Consistent?: Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent?: Yes or No

Est. Repairs: 04 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN/OUT

Veh No: F BQ 5424P Yr Regn: 10, 19

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Yamaha Aero c.c. 155

Colour: Black A/C: Insured / Std / NI / NA

Sp. Reading: \_\_\_\_\_ T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: MH3SG 4620K J 069295

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / S/Rlm / STD A/Rlm or

Tyre Size: F: Motix 1001 80R14

R: Shinko 1401 70R14

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

TOYO / YOKO or

Front

R/Bal. 4 mm

L/Bal. \_\_\_\_\_ mm

D.O.A. 3/9/24

Rear

R/Bal. 3 mm

L/Bal. \_\_\_\_\_ mm

D.O.I. 11/9/2024

Survey held at \_\_\_\_\_

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Frt & N/S body

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

Date / Time Action / Instruction

1 PRS, no key, no documents given

EM repair com 83-4K

Date/Time, File Pass to?

: Prell. Report

: Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trlp: \_\_\_\_\_

Survey Fee:

Transportation

S + RS. SI

Printers

Others

Add Fee:  : Site Insp (\$ \_\_\_\_\_)

: Interview (\$ \_\_\_\_\_)

: Tech Invs (\$ \_\_\_\_\_)

: Weekend (\$ \_\_\_\_\_)

TOTAL

Report Format :

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