

ASS. REC. BY: NAZ

REF: ECICS

LIS

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD/TP/WS/TP RES/OD RES/EVA/INV/MV

To Inspect Vehicle No: SML 1665H

at Workshop m/s VERVE MOTORWORKZ

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: \$500

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

Bal. or Market Value: 87K

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: SML 1665H Yr Regn: 31 OCT. 2013

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

Truck / Trailer or _____

Make: BMW 316I 1.6 e.e. 1,598

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

Sp. Reading: N/A T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WBA3A12050J719782

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 275/80R19

R: 11

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

TOYO / YOKO or FALKEN

Front _____ Rear _____

R/Bal. BURNT mm R/Bal. 5 mm

L/Bal. BURNT mm L/Bal. 5 mm

D.O.A. 18/9/2024 D.O.I. 23/9/2024

Survey held at VERVE MOTORWORKZ

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

O/S FRT, N/S FRT, engine compartment

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

Date / Time	Action / Instruction
	<u>COE REBATE \$33 024.00</u>
	<u>Vehicle badly burnt. uneconomical to repair. Recommend total loss.</u>

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

1) _____
Date/Time, File Return to?

2) _____

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

Days Of Repair: _____

Resurvey No. of Trip: _____

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

Survey Fee:	
Transportation:	
\$ - RS - SI	
Photos	
Others	
TOTAL	