Asr: Ref:

ASSIGNMENT

From: Date:

Estm: Mot:

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

To Inspect Vehicle No:

at Workshop/s

of

Insured:

Policy No

Claim's No

Sum Ens'd: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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

N/S	O/S

Bal. or Market Value:

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

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: GBL8336S Yr Regn: 2022 April

Type: M.Car / M.Cycle / Bus / Van / Lorr / Taxi / Prime Mover / Truck / Trailer or

Make: Toyota Hiace c.c 1998

Colour Green A/C: Insured / Std / NI / N.A

Sp.Reading 57234 T/Radio: Insured / Std / NI / N.A

Eng/No:

C/No: TRH200524912O

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 195 R15C

R: 195R15C

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

Front		Rear	
R/Bal.	06 mm	R/Bal.	06 mm
L/Bal.	06 mm	L/Bal.	06 mm
D.O.A.		D.O.I.	03/01/25

Survey held at Xin Hua

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

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

Date / Time	Action / Instruction
	TP Reinspection (China) COE Expiry !
	Estimate given during : Yes ( )
	1st Survey : No ( )
	MV :
	PV :
	Nett :

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2)

Report Format :

☐ : Preli. Report

☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Addl Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Inve ($)

Survey Fee:

Transportation: $ + R$ $

Photos

Others