

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To inspect Vehicle No: SAS 6338M

at Workshop m/s TOWER TRANSIT

of 21, Bulum DR

Insured: SMR

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.

|     |     |
|-----|-----|
| N/S | O/S |
|     |     |

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: SAS 6338M Yr Regn: 2012 / DK

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

Truck / Trailer or

Make: MERCEDES BENZ CITRO c.c. 6374

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

Sp. Reading: 644401 T/Radio: Insured / Std / NI / NA

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

C/No: W0362808323123773

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 275/70R225

R: \_\_\_\_\_

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

TOYO / YOKO or

Front 8 mm R/Bal. 8/8 mm

L/Bal. 8 mm L/Bal. 8/8 mm

D.O.A. 18/11/24 D.O.I. 22/11/24

Survey held at BULUM DR

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

N/S FR

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

Date / Time Action / Instruction

Date/Time, File Pass to?

☐

: Preli. Report

1)

Date/Time, File Return to?

☐

: Final Report

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:

) S + RS SI

) Photos

) Others

TOTAL

# ESTIMATED ACCIDENT REPAIR COST



TOWER TRANSIT

Co. / GST Reg No. 201419417K

|                           |               |
|---------------------------|---------------|
| ACCIDENT TIME REPORTED    | 8:43          |
| ACCIDENT DATE             | 18-Nov-24     |
| BUS CAPTAIN NAME          | SOH MENG CHAI |
| THIRD PARTY CLAIM AGAINST | SMRT          |

|                         |          |
|-------------------------|----------|
| BUS REGISTRATION NUMBER | SBS6338M |
| BUS TYPE (SD/DD)        | SD       |
| BUS ROUTE NO.           |          |
| BUS ADVERT (Y/N)        | N        |

## SECTION 1 : PARTS & CONSUMABLE ITEMS (MATERIAL COST)

| NO. | Part or Item Description    | Quantity                | Total Cost         |
|-----|-----------------------------|-------------------------|--------------------|
| 1   | NS MIRROR <i>cm</i>         | 1                       | \$ 2,946.70        |
| 2   | REFLECTOR STICKER <i>cm</i> | 2                       | \$ 44.00           |
|     |                             | 9% GST                  | \$ 269.16          |
|     |                             | <b>PARTS TOTAL COST</b> | <b>\$ 3,259.87</b> |

## SECTION 2 : ASSESSMENT / REPAIR / SPRAY PAINT (LABOUR COST)

| LABOUR ITEM (PLEASE SPECIFY IF ITS ASSESSMENT, REPAIR OR SPRAY PAINT) | TOTAL COST                           |
|-----------------------------------------------------------------------|--------------------------------------|
| TO DISMANTLE & REPLACE :-<br>• DISMANTLE AND REPLACE ITEM NO :1-2     | <i>325</i><br>\$ <del>1,300.00</del> |
| SPRAY PAINTING \$640 PER PANEL                                        | 9% GST \$ 117.00                     |
| LABOUR CHARGES \$650 PER DAY                                          | <b>LABOUR TOTAL COST \$ 1,417.00</b> |

## SECTION 3 : NUMBER OF DAYS BUS IN WORKSHOP FOR SURVEY & REPAIRS

|                    |    |                      |             |
|--------------------|----|----------------------|-------------|
|                    |    | DATE IN              | 18/Nov/2024 |
|                    |    | DATE & TIME SURVEY   |             |
|                    |    | DATE OUT             |             |
|                    |    | TOTAL NUMBER OF DAYS | 1           |
| BUS TYPE (SD / DD) | SD |                      |             |
| LOSS OF USE COST   |    | \$300.00             |             |

**LKK Auto Consultants** hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Authorised by Repairer

Signature:

Date:

*Repair*  
*Hp 90010068*  
*1 day*  
*22/11/24*  
*Reg after repair*

| SUMMARY      |                    |
|--------------|--------------------|
| SECTION NO.  | COST               |
| 1            | \$ 3,259.87        |
| 2            | \$ 1,417.00        |
| 3            | \$ 300.00          |
| <b>TOTAL</b> | <b>\$ 4,976.87</b> |