REF:

ASSIGNMENT

From: Date:
Estimate Cost:
OD / TPPD / TP RES / OD RES / EVA / INV / MV
To inspect Vehicle No:
at Workshop/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.

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

Date: Person Contacted: Vehicle: IN / OUT

Veh No: SBR90X Yr Regn: 2015, June.
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or
Make: Toyota Vellfire C.C 2493
Colour: White. A/C: Insured / Std / NI / NA
Sp.Reading: 143066 T/Radio: Insured / Std / NI / NA
Eng/No:
C/No: AGH30-0014648
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: 235/50R18.
R: 235/50R18.
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.	21/11/24.

Survey held at Ryder.
Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Rear O/S.
The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	TP INC
	MV : 38K
	PY : 23.4K
	Nett : 14.6K

COE Expiry : ✓

Estimate given during 1st Survey : Yes (✓) No ( )

655E.

Date/Time, File Pass to? [ ] : Preli. Report
1) [ ] : Final Report
Date/Time, File Return to?
2)

Report Format :

Days Of Repair:
Resurvey No. of Trip:

Add Fee: [ ] : Site Insp ($)
[ ] : Interview ($)
[ ] : Tech. Inve ($)

Survey Fee:	
Transportation: $ + RS. $	
Photos	
Others	