

Veh No: SMRS479X Yr Regn: 2020 / Jan.
Type: (M.Car) / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or _____
Make: Mit A Hage C.O. 193
Colour: Black A/C: Insured / Std / NI / NA
Sp. Reading: 212565 T/Radio: Insured / Std / NI / NA
Eng/No: _____
C/No: MMBSTA13AKH002482
Gen. Cond: (Good) / Fair / Poor / Burnt
Steering: (In order) / Jammed / Leaked / Burnt or _____
Brake: (In order) / Jammed / Leaked / Burnt or _____
Mod: Nil / (S/Rim) / STD A/Rim or _____
Tyre Size: F: 195/50R15
: R: 195/50R15

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

	
N/S	O/S

Bal. or Mktg. Value:

IDAC Accident Report	Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

[illegible]

Lum Sum:	%	3 Val: Yes or No
1	100	Yes
2	100	Yes
3	100	Yes
4	100	Yes
5	100	Yes
6	100	Yes
7	100	Yes
8	100	Yes
9	100	Yes
10	100	Yes
11	100	Yes
12	100	Yes
13	100	Yes
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87	100	Yes
88	100	Yes
89	100	Yes
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92	100	Yes
93	100	Yes
94	100	Yes
95	100	Yes
96	100	Yes
97	100	Yes
98	100	Yes
99	100	Yes
100	100	Yes

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

ES/DUN/EXNOVA/GY/FS/LIZA/MIC/OHTSU/PIR/SUMI/
TOYO/YOKO or *Tanaka*

<u>Front</u>			<u>Rear</u>		
R/Bal.	<u>06</u>	mm	R/Bal.	<u>06</u>	mm
L/Bal.	<u>06</u>	mm	L/Bal.	<u>06</u>	mm
D.O.A.			D.O.I.	<u>26/11/24</u>	

*Survey held at Modern

Des. of Damages : Frt / 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 A16.
	COE Expiry :
	Estimate given during : Yes () 1st Survey : No (✓)
	MV :
	PV :
	Nett :
	516H.

Date/Tme: File Pass to?

☐	: Prel. Report
☐	: Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

1) Date/Time, File, Return to?

Transportation:

2)

3 + RS. 5

Report Formed :

6. PROPOSAL FOR A NEW PROJECT

Add Fee: ☐ : Site Insp (\$

7: Interview - (3)

Tech. Inve. (2)

Photos

1	Others	
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