

ASSIGNMENT

From: _____ Date: _____
 Estin: _____
 OD / TP RES / CD RES / EVA / INV / MV
 To in _____ Vehicle No: _____
 at W _____
 of _____
 Insured: _____
 Policy No: _____
 Claims No: _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Vehicle: _____
 (Policy Condition)

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

N/S	O/S

Bel. 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: SJT2407Z Yr Regn: 2009, Sept

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

Truck / Trailer or

Make: Hyundai Avante C.D. 1591

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

Sp. Reading: 49760 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KMNDUA1BMAU892598

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: 185/65R15

R: 185/65R15

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

TOYO / YOKO or

Front

R/Bal. 06 mm

L/Bal. 06 mm

D.O.A. _____

Survey held at

Des. of Damages: Frnt / Rear / O/S / N/S / U/C / Roof top or

Rear

R/Bal. 06 mm

L/Bal. 06 mm

D.O.I. 29/11/24

Power Build

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

Date / Time	Action / Instruction
	<u>TP Liberty (PRS)</u>
	<u>COE Expiry : 31/08/2029.</u>
	<u>Estimate given during : Yes ()</u>
	<u>1st Survey : No ()</u>
	<u>MV : 45K.</u>
	<u>PV : 13.9K</u>
	<u>Nett : 31.1K</u>
	<u>935A</u>

Date/Time, File Pass to?

☐

: Preli. Report

1)

Date/Time, File Return to?

☐

: Final Report

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Inve (\$ _____)

Survey Fee: _____

Transportation: _____

3 + RS \$1

Photos

Others

Report Form ref: _____

Report Form ref: _____