

REF: CS/CTI24060308/Anh3

ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estin: \_\_\_\_\_  
 OD / TP RES / 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 Veh: \_\_\_\_\_  
 (Policy Condition)

Veh No: SFT3134B Yr Regn: 2014, Nov  
 Type: M/Car M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or \_\_\_\_\_  
 Make: Mazda 5 C.D. 1998  
 Colour: Silver A/C: Insured / Std / NI / NA  
 Sp. Reading: 315759 T/Radio: Insured / Std / NI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: JM6CW1071F0120456  
 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: 205/55R16  
 R: 205/55R16

Remark: The veh had commenced its repair at the time of inspection.  
 Bal. or Market Value: \_\_\_\_\_  
 IDAC Accident Report: \_\_\_\_\_ Consistent?: Yes or No  
 GIA / PR Seen: \_\_\_\_\_ Consistent?: Yes or No  
 Est. Repair: \_\_\_\_\_ days Res.: Yes or No  
 Lum Sum: \_\_\_\_\_ % 3 Val: Yes or No  
 CA / REV / REP. / 24 HRS  
 Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

N/S	O/S

BS / DUN / EXNOVA / GY / FS / IZA / 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. \_\_\_\_\_  
 Survey held at NSI D.O.I. 28/06/24  
 Des. of Damages: Front / Rear / O/S / N/S / U/C / Rooftop or  
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>TP China Total Loss</u>
	<u>COE Expiry :</u>
	<u>Estimate given during : Yes ( )</u>
	<u>1st Survey : No (✓)</u>
	<u>MV : 13K 13.5k</u>
	<u>PV : 9.6K 9.6k</u>
	<u>Nett: 3.4K 3.9k</u>
	<u>02/07/24 submit extensive total loss ; MV \$13,500 ; LTA : \$9521; NV : \$3979</u>

Date/Time, File Pass to?  : Preli. Report  
 1)  : Final Report  
 Date/Time, File Return to?  
 2) \_\_\_\_\_  
 Days Of Repair: \_\_\_\_\_  
 Resurvey No. of Trip: \_\_\_\_\_  
 Addl Fee:  : Site Insp (\$)  : Interview (\$)  : Tech. Inve (\$)  
 Survey Fee: \_\_\_\_\_  
 Transportation: \_\_\_\_\_  
 Photos \_\_\_\_\_  
 Others \_\_\_\_\_