ASS, REC. BY:

Steve

REF:

CS/ICS24120209/Evh3

ASSIGNMENT

From: Date:	Veh No: SMQ4868T Yr Regn: 28 Dec 2021
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No:	Make: TOYOTA CAMRY c.c 2487
at Workshop m/s	Colour Black A/C: Insured / Std / NI / NA
of	Sp.Reading 67738 T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	C/No: JTNB23HK1031*08504
Claims No.	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim or
	Tyre Size: F: 235/45R18
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO / YOKO or
Bal. or Market Value:	<u>Front</u> <u>Rear</u>
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 6 mm R/Bal. 6 mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. 6 mm L/Bal. 6 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 13/12/24 D.O.I. 19/12/24
Lum Sum: % 3 Val.: Yes or No	Survey held at Borneo
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT	
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
MV - \$135k	
Date/Time, File Pass to? : Preli. Report	Days Of Repair:
; Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
2) Add Fe	ee:: Site Insp (\$)s+RsSi
9	: Interview (\$) Photos
Reperior :	: Tech. Invs (\$) Others
Lump Sum / LBJ: (%)	: Weel end (\$)
	TOTAL