REF: CS/INC24120265/Aqh3

ASSIGNMENT

From: Date:

Estm Cost:

OD / TPFT / TP RES / CD 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 Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 13 days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SJZ5525P Yr Regn: 1991, NOV

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

Make: Honda CRX c.c 1590

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

Sp.Reading 42343X T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: JHMED9370OS310032

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: 195/55R15

R: 195/55R15

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.	18/12/24

Survey held at N51

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or

Rear O/S, U/C, Front

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

Date / Time	Action / Instruction
	TP INC
	LS $14300, 13 days (Red $21782, 60%)
	MV : 50K
	PV : 11K
	Nett : 39K

COE Expiry : 31/03/2029.

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

07H.

Date/Time, File Pass to? 1) 20/03 Typist

☐ : Preli. Report

☐ : Final Report

Date/Time, File Return to? 2)

Report Format : TP

Days Of Repair: 13

Resurvey No. of Trip: 2

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Inve ($)

Survey Fee:

Transportation: 3 + RS. SI

Photos

Others