REF: CS/INC24120288/Avh3

ASSIGNMENT

From: _____ Date: _____

Estimate Cost: _____

OD / TPFT / TP RES / CD RES / EVA / INV / MV

To Insured Vehicle No: _____

at W/Shop/s _____ _____

of _____

Insured: SMX 6958S

Policy No _____

Claim's No MT/1308774-002

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: _____ 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: SNL5348K Yr Regn: 2023, July.

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

Make: Mazda 3 c.c 1496

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

Sp.Reading 59700 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JM6BP2SAAP1LS2507

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: 205/60 R16

R: 205/60R16

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.	16/12/2024	D.O.I.	19/12/24

Survey held at Elite Restoration

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or Front o/s, u/c, Rear n/s

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

Date / Time	Action / Instruction
	TP INC. COE Expiry :
20/3/25	Adrian confirmed LS $25,300 (red 37,674.93, 59%)
	Estimate given during : Yes (✓)
	MV : 1st Survey : No ( )
	PV :
	Nett :

Date/Time, File Pass to? 1) _____ ☐ : Preli. Report ☐ : Final Report

Date/Time, File Return to? 2) _____

Report Format : _____

Days Of Repair: 26

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____) ☐ : Interview ($ _____) ☐ : Tech. Inve ($ _____)

Survey Fee: _____

Transportation: _____ B + RS _____ SI

Photos _____

Others _____