ASS. REC. BY: Kenneth | REF: TU / CS3/III24120452/Kvp3

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

CV / TP / WS / TP RES / QD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s Flesh Road

of 28 Kranji loop 05-07

Insured: PC 655E 207D

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: $160k

IDAC Accident Rport: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 16 days Res.: Yes or No

Lum Sum: 1.B.I % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: Sam Vehicle: IN / OUT

Veh No: CB 5599K Yr Regn: 01, 22

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

Make: Volvo B8r c.c 7698

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

Sp.Reading 256228 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: YV3T7U523CA 799510

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: _____

R: 295/80R 22.5 (D)

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Firemax

Front		Rear	
R/Bal.	8 mm	R/Bal.	7 7 mm
L/Bal.	8 mm	L/Bal.	7 7 mm
D.O.A.	23/12/24	D.O.I.	30/12/2024

Survey held at _____ ✓

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

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

Date / Time	Action / Instruction
/	PRS
	Eh repair COH 830-36k

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) _____

☐ : Prell. Report

☐ : Final Report

Days Of Repair: 16

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ Tech Invs ($ _____)

☐ Weekend ($ _____)

Survey Fee:

Transportation: ___ $ - RS. ___ SI

Parking

Others

TOTAL

Report Format :

Lump Sum / I.B.I: ($ _____)