

ASSIGNMENT

From: _____ Date: _____
 Estn: _____
 OD / TP / RES / CD RES / EVA / INV / MV
 To in _____ Vehicle No: _____
 at _____ m/s
 of _____
 Insured: _____
 Policy No: _____
 Claim No: _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Vehicle: _____

Veh No: SNH 262SB Yr Regd: 2009, August
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or
 Make: Mit Evo X C.D. 1998
 Colour: Grey A/C: Insured / Std / NI / NA
 Sp. Reading: 23/246 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: JMF SN CZ 4A94000280
 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: 265/35R28
 R: 265/35R18

(Policy Condition)
 Remark: Vehicle had commenced its repair at the time of inspection.

N/S	O/S

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

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. 08/07/24

Survey held at Auto United
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

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

Date / Time _____ Action / Instruction

TP Sampo

COE Expiry: 31/03/2029

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

MV: 1201C
 PV: 15.6K
 Nett: 104.4K

798C

Date/Time, File Pass to?

☐ : Preli. Report
☐ : Final Report

1) Date/Time, File Return to?
 2) _____

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Inve (\$ _____)

Survey Fee: _____

Transportation: _____

3 + RS. \$1 _____

Photos _____

Others _____

Report Format: _____

Report Form: _____