Ass. By: REF: CS/FCI24070188/Avp3

PREMIUM AUTOMOBILES

ASSIGNMENT

From: Date:
Estimate Cost:
OD / TP / TP RES / OD RES / EVA / INV / MV
To Inspect Vehicle No:
at W/Shop m/s
of
Insured: SHC 1503Z
Policy No:
Claims No: D24005990MFCT
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 Report: 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: SNF6294G Yr Regn: 2022, June.
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or
Make: Toyota Noah Hybrid C.C 1797
Colour: Black A/C: Insured / Std / NI / NA
Sp.Reading: 142640 T/Radio: Insured / Std / NI / NA
Eng/No:
C/No: ZWR80 0506553
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: 195/65R15
R: 195/65R15
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Kapsen

Front
R/Bal. 06 mm
L/Bal. 06 mm

Rear
R/Bal. 06 mm
L/Bal. 06 mm

D.O.A. 8/7/2024 D.O.I. 10/07/24.
Survey held at: Automobile Hub
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
	1P 1st Cap
20/8/24	Adrian confirmed LS $1400 (Red 875.48, 38%)
	MV: 175K
	PV: 97.1K
	Nett: 77.9K

COE Expiry: ✓

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

9306

Date/Time, File Pass to? 1) [ ] : Preli. Report [ ] : Final Report
Date/Time, File Return to? 2)
Report Format:

Days Of Repair: 2
Resurvey No. of Trip:
Addl Fee: [ ] : Site Insp ($) [ ] : Interview ($) [ ] : Tech. Inv ($)

Survey Fee:
Transportation: S + RS. SI
Photos
Others