

(08/11/13) - wef

ASS. REC. BY: Marcus

REF:

CS/MSH24070259/493

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD TP / WS / TP RES / OD RES / EVA / INV / MVTo Inspect Vehicle No: FBR545Bat Workshop m/s Eno fire

of _____

Insured: GQ 5515B

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: \$15k

IDAC Accident Rpt: _____ Consistent?: Yes or No

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

Est. Repairs: 1 days Res.: Yes or NoLum Sum: 1-B.1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

5246

Vehicle: IN / OUT

Date: _____ Person Contacted: 27A5926Veh No: FBR545B Yr Regn: 11/06/24Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Honda CB150X c.c. 149Colour: Red A/C: Insured / Std / NI / NASp. Reading: 1434 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: MHIKCE119P K019160Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 100-82/7R: 130-70-17

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or IRC

Front _____ Rear _____

R/Bal. 9 mm R/Bal. 9 mm

L/Bal. _____ mm L/Bal. _____ mm

D.O.A. 15/7/24 D.O.I. 17/7/24

Survey held at _____

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

Rear

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

Date / Time Action / Instruction

bike new fell accident scene photo of foldernew bike \$17k. Machine \$750011/10/24 P/P \$500 (Red \$1453, 74%) insured MR Teo

Date/Time, File Pass to?

1) 11/10/24 ☐ : Preli. Report☐ : Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: 1Resurvey No. of Trip: 1Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)Report Format: MER-TPLump Sum / I.B.I. (\$) 500

Survey Fee: _____

Transportation: _____

S + RS, \$ _____

Photos _____

Others _____

TOTAL