ASS. REC. BY: CS | UOI 240704 40 | Dup 3

ASSIGNMENT

27/09/2024

From: Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

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:

IDAC Accident Report: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 9 days Rea.: Yes or No

Lum Sum: 7/12 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SHC 8481 G Yr Regn: 28/09/2023

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

Make: Toyota Prius c.c. 1797

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

Sp.Reading N.A T/Radio: Insured / Std / NI / NA

Eng/No: 2ZR2X01862

C/No: JTDAE3AU.403001451

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: 195/60 R17

R: "

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.	25/07/2024	D.O.I.	29/07/2024

Survey held at Sprint Bayview

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
	UOI SOK 8220 C
04/11/24	finalise PIP 13,738.91 with 9 days
	(Red. $ 2428.51.63%)

Date/Time, File Pass to?
1)

Date/Time, File Return to?
2)

☐ : Preli. Report
☐ : Final Report

Report Format :

Lump Sum / I.B. : ($)

Days Of Repair: 9

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp ($)
☐ : Interview ($)
☐ : Tech. Invs ($)
☐ : Weekend ($)

28×25=700

Survey Fee:	250+700+90
Transportation:	60
S+RS S	80+80
Photos	127
Others	
TOTAL	1347

650 089

6/11/24