

ASS. REC. BY: **Steve**REF: **CASE-24060084**

CS/CTI24060084/Enh3e2 (SMF 2333R)

ASSIGNMENT

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. _____

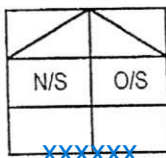
Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

Bal. or Market Value: _____

IDAC Accident Report: _____ Consistent?: Yes or No

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

Est. Repairs: 4 days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: **SMF2333R** Yr Regn: **02 Jan 2010**Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: **NISSAN GT-R** C.C. **3799**Colour **White** A/C: **Insured / Std / NI / NA**Sp. Reading **200538** T/Radio: **Insured / Std / NI / NA**

Eng/No: _____

C/No: **JN1GANR35U0102123** *Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt or _____Brake: Inorder / Jammed / Leaked / Burnt or _____Modi: Nil / S/Rim / STD A/Rim or _____Tyre Size: F: **285/35ZR20**R: **"**BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or _____

Front

Rear

R/Bal. **6** mm R/Bal. **6** mmL/Bal. **6** mm L/Bal. **6** mmD.O.A. **07/06/24** D.O.I. **13/06/24**Survey held at **MCR MOTORS**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
	MV - \$260k
	Estimate mark later
	We will be advising our Principal a cost of repair of LS \$7,350 /- with 4 days of repair, subject to (red, \$37278.98, 83%)

Date/Time, File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Rep. Format: _____

Lump Sum / L.B.I. / _____

Days Of Repair: **4**

Resurvey No. of Trip: _____

Add Fee:

☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL