

CS/AGI24080013/Aqp3

ASSIGNMENT

Front: _____ Date: _____
 Est: _____
 OD / TP / TP RES / OD RES / EVA / INV / MV
 To in Vehicle No: _____
 at Work m/s _____
 of _____
 Insured: _____
 Policy No: _____
 Claims No: _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

Veh No: SB8867D Yr Regn: 2016 Dec.
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: Mercedes Benz E200 C.D. 1991
 Colour: Red A/C: Insured / Std / NI / NA
 Sp. Reading: 239372 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: WDD2130422A032566
 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: 275/35R19
 R: 275/35R19

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

N/S	O/S

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Hublead
 Front _____ Rear _____
 R/Bal. 06 mm R/Bal. 06 mm
 L/Bal. 06 mm L/Bal. 06 mm
 D.O.A. _____ D.O.I. 05/08/24
 Survey held at One Garage
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or _____

Bal. or Market Value: _____
 IDAC Accident Report: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 3 days Res.: Yes or No
 Lum Sum: _____ % 3 Val.: Yes or No
 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
	<u>TP Budget Direct</u>
	<u>LS \$3500, 3 days (Red \$7793.10, 69%)</u>
	<u>MV: RM 141K</u>
	<u>PV: RM 40K</u>
	<u>Nett: RM 101K ± 29K</u>

Date/Time, File Pass to? ☐ : Preli. Report

1) 10/04 Typist ☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 3

Resurvey No. of Trip: 2

Add Fee: ☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Insp (\$ _____)

Survey Fee:

Transportation:

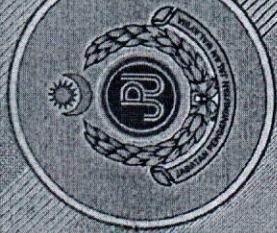
\$ + R.S. \$ _____

Photos

Others

Report Forward: TP

Report Forward: A.P.P.P. (C)



SIJIL PEMILIKAN KENDERAAN

JABATAN PENGANGKUTAN JALAN

TB06UE36

No. Pendaftaran	:	SB8867D
No. ID	:	880709015081
Nama Pemunya Berdaftar	:	YAP SERN SHEN
Alamat	:	NO 41 JALAN NOBAT TAMAN BAHAGIA 83700 YONG PENG JOHOR
No. Chasis/No. Enjin	:	WDD2130422A032566 / 27492030701925
Buatan>Nama Model	:	MERCEDES BENZ / E200 SEDAN
Keupayaan Enjin	:	1991
Bahan Bakar	:	PETROL
Status Asal	:	KENDERAAN IMPORT BARU
Kelas Kegunaan	:	PERSendirian-MOTOKAR INDIVIDU
Jenis Badan/Tahun Dibuat	:	MOTOKAR / 2016
Tarikh Pendaftaran	:	28/12/2016
B. D. M/B. G. K/BTM	:	-
Syarat Pendaftaran 1	:	-
Syarat Pendaftaran 2	:	-
Syarat Pendaftaran 3	:	-

COVER NOTE

STAMP DUTY PAID

etiqa
 General Insurance

Policyholder	Cover Note No.
YAP SERN SHEN	V6502082-03
NO 41 JALAN NOBAT	Account No.
TAMAN BAHAGIA	V0023515
YONG PENG	Agent Name
YONG PENG	LEONG WEI TING
83700 JOHOR	Product Type
	Private Car - Private Use
	Period of Insurance from 05/03/2024 To 04/03/2025 (both Dates Inclusive). Any subsequent period for which the Insured shall pay and the Company shall agree to accept a renewal premium.

NRIC No	: 880709-01-5081	Business Reg No	:	Sum Insured	RM	141000.00
Business/Occupation	: Self Employed	Other ID No	:	Gross Premium	RM	4008.41
Vehicle Information				Less: No Claim Discount	RM	2204.63
JPJ Document No	:			55.00%		
Vehicle Reg No	: SB8867D	Log Book No	: NIL	Drive Less Save More	RM	0.00
Make	: MERCEDES-BENZ			Legal Liability of Passengers	RM	7.50
Model	: MERCEDES-BENZ E 200 AVANTGARDE (CKD)			for Negligent Acts		
Engine No	: 27492030701925	Cover Type	: Comprehensive	Legal Liability to Passengers	RM	37.80
Chassis No	: WDD2130422A032566	Vehicle Type	: Private Car	Windscreen (RM8,000.00)	RM	1200.00
Year of Manufacture	: 2016	License Type	: Normal Vehicle			
Cubic Capacity	: 1991	Use For	: Private Use		RM	3049.08
Seating Capacity	: 5			Add: Service Tax 6.00 %	RM	182.94
Financial Interest	: NIL			Stamp Duty	RM	10.00
Authorised Driver				TOTAL AMOUNT DUE	RM	3242.02
1 YAP SERN SHEN	880709-01-5081			Excess All Claims	RM	0.00
2 ANY AUTHORISED DRIVER						

IMPORTANT NOTICE - APPLICABLE TO ALL CONSUMER PRODUCTS

(Insurance wholly for purposes unrelated to your trade, business or profession)

Where You have applied for this Insurance wholly for purposes unrelated to Your trade, business or profession, You had a duty to take reasonable care not to make a misrepresentation in answering the questions in the Application Form (or when You applied for this Insurance) i.e. You should have answered the questions fully and accurately. Failure to have taken reasonable care in answering the questions may result in avoidance of Your contract of Insurance, refusal or reduction of Your claim(s), change of terms or termination of Your contract of Insurance in accordance with the remedies in Schedule 9 of the Financial Services Act 2013. You were also required to disclose any other matter that You knew to be relevant to our decision in accepting the risks and determining the rates and terms to be applied.

You also have a duty to tell Us immediately if at any time after Your contract of Insurance has been entered into, varied or renewed with Us any of the information given in the Application Form (or when You applied for this Insurance) is inaccurate or has changed.

Issue Date : 22-02-2024/04:49 PM
 Issue At : J1
 Issue By : v0023515

For and on behalf of
 Etiqa General Insurance Berhad



Visit www.etiqa.com.my or our nearest branch to obtain the full policy wordings.
 Help preserve the country's natural resources.



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