Signature: Tanjiah | REF: AIG | 23811 | T1ha3 , (W

ASSIGNMENT

From: | Date: 6/2/18

Estimated Cost:

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

To Inspect Vehicle No: SKU 35662

at Workshop m/s Performance

of 303 Alexandra Rd

Insured:

Policy No.:

Claims No.:

Sum Insured: | Excess:

(Client's Record) After 1-30pm

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 Rport: 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 wp

Vehicle: IN / OUT

Date: | Person Contacted:

Veh No: SKU 35662. | Yr Regn: 2015 May.

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

Make: BMW 316I | c.c 1598

Colour: Black | A/C: Insured / Std / NI / NA

Sp.Reading: 64797. | T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: WBA3A16090NS38775

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: 205/60R16

R: 〃

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.		D.O.I.	6/2/18@1530.

Survey held at PML

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

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

Date / Time	Action / Instruction

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

1) ☐ : Final Report

Date/Time. File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

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

Report Format :

Lump Sum / I.B.I: ($

Survey Fee

Transportation

($ - R$ $)

Photos

Others

TOTAL