Surveyor: RAFAEL | REF: | 0701A

ASSIGNMENT

From:	Date:
Estimated Cost:	
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	
To Inspect Vehicle No: SKA 2467M	
at Workshop m/s KAH MOTOR	
of 785, [illegible]	
Insured: TQ1 / PS	
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 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	Vehicle: IN / OUT
Date:	Person Contacted:

Veh No: SKA 2467M	Yr Regn: 2011 JAN
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or	
Make: HONDA CIVIC 1.6 A	c.c 1595
Colour: BROWN	A/C: Insured / Std / NI / NA
Sp.Reading: 043126	T/Radio: Insured / Std / NI / NA
Eng/No:	
C/No: JHMFD4620AS280608	
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: 205/55R16	
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. 15/12/17	D.O.I. 19/12/17
Survey held at: KAH MOTOR	
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

Date/Time. File Pass to?
1)
Date/Time. File Return to?
2)

☐ : Preli. Report
☐ : Final Report

Days Of Repair:
Resurvey No. of Trip:

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

Survey Fee:
Transportation
($ + RS)
Photos
Others
TOTAL

Report Format :
Lump Sum / I.B.I: ($)