Surveyor: Taufik REF: QBE

ASSIGNMENT

From: Date: 17/01/2018

Estimated Cost:

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

To Inspect Vehicle No: SHB 4588P

at Workshop/m/s: Ding Automotive

of: 31 Corporation Road

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
X	

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: SHB4588P Regn: 2017 Jan

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

Make: Hyundai i40 cc: 1685

Colour: Yellow A.C: Insured / Std / NI / NA

Sp Reading: 207 824 T Radio: Insured / Std / NI / NA

Eng No:

C/No: KMHLB41UMHU098352

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 Triangle

Front			Rear		
R.Bal.	6	mm	R.Bal.	6	mm
L.Bal.	6	mm	L.Bal.	6	mm

D.O.A. D.O.I. 17/1/18 @ 1330

Survey held at: Ding Auto Corporation Rd

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: [ ] : Preli. Report

[ ] : Final Report

Date/Time File Return to:

Days Of Repair:

Resurvey No. of Trip:

Survey Fee

Transportation

Add Fee: [ ] Site Insp $

[ ] Interview $

[ ] Technical $

[ ] Advert $

Report Format:

Lump Sum / I.B / ...