

SIR/MS/MS

REF:

III

1228/14263 - (C)

32000

106 XP/149. 2022/106C

ASSIGNMENT

From:

Date:

23/01/18

Estimated Cost:

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

To Inspect Vehicle No:

SJA 5422J

at Workshop m/s

Ethoz

of

30, Bkt Baktok Crescent

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Mr. Sim

Make of Veh:

After 10 am

(Policy Condition)

Remark: The veh had commenced its

repair at the time of inspection.



Bal. or Market Value:

IDAC Accident Rpt:

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

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

Veh No:

SJA 5422J

Yr Regn. 2007

08C

Type: M/Car / M/Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Suzuki swift 1.6 AT

cc

1586

Colour

yellow

A/C:

Insured / Std / NI / NA

Sp. Reading

184117

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

JSAE ZC 315 00200765

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

205/45ZR16

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal.

5

mm

R/Bal.

5

mm

L/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

17/01/18

D.O.A.

23/01/18

Survey held at

ETHOZ

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

Rear N/S

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

Date/Time, File Pass to?

☐

Preli. Report

1)

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation

S/P-R/S

Photos

Others

Add Fee:

☐

Site Insp

(\$

☐

Interview

(\$

☐

Tech. Invs

(\$

☐

Weekend

(\$

Report Format :

Lump Sum / I.B.I: (\$

TOTAL