Survey No: REF: ASM

ASSIGNMENT

From: Date: 19/2/18

Estimated Cost:

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

To Inspect Vehicle No: SLB 3786T

at Workshop m/s: S & H Motor

of 160, Sin Ming Drive #07-02

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

Bal. or Market Value:

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 04 days Res.: Yes or No

Lum Sum: 1.B.1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS up

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SLB 3786T Yr Regn: 04 16

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

Make: NISSAN CC: 1598

Colour: M. Grey A/C: Insured / Std / NI / NA

Sp Reading: 44942P T/Radio: Insured / Std / NI / NA

Eng No:

Ch No: MNTBBAB17Z0026046

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: 205/55R16

R:

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

Front		Rear	
R/Bal:	9 mm	R/Bal:	9 mm
L/Bal:	9 mm	L/Bal:	9 mm
D.O.A:	14/2/18	D.O.I:	19/2/18

Survey held at: ✓

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or O/S R4

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

Date / Time	Action / Instruction
20/2	file pass to Lita

Date/Time File Pass to:

Date/Time File Return to:

☐ : Preli. Report

☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ Site Insp / $ ☐ Interpret / $ ☐ Tech Insp / $ ☐ Assessing / $

Report Format:

Lump Sum / I.B.I / $

Survey Fee:

Transportation:

$ + GST $

Photos:

Other:

TOTAL: