

Surveyor

ASSIGNMENT

From: Date: 30/04/2018

Veh No: PC 83E Yr Regn: 16/8/2011

Estimated Cost:

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

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

Truck / Trailer or

To Inspect Vehicle No: PC 83E

Make: King Long XMQ6900K C.C. 6693

at Workshop m/s

Crown Asia

Colour: Multi Colour A/C: Insured / Std / NI / NA

of

No. 44 Sungai Kaudat St 1

Sp. Reading: 227358 T/Radio: Insured / Std / NI / NA

Insured:

Eng/No:

Policy No.

C/No: LA 6R10S13 81313 203631

Claims No.

Gen. Cond: Good / Fair / Poor / Burnt

Sum Insured:

Excess:

Steering: In order / Jammed / Leaked / Burnt or

(Client's Record)

Brake: In order / Jammed / Leaked / Burnt or

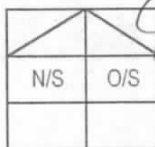
Make of Veh:

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

(Policy Condition)

Tyre Size: F: 7R22.5 Falken

Remark: The veh had commenced its repair at the time of inspection.



R: 9R22.5 Double Coin

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

TOYO / YOKO or

Bal. or Market Value:

Front

Rear

IDAC Accident Rpt: Consistent? : Yes or No

R/Bal. 6 mm

R/Bal. 6 mm

GIA / PR Seen: Consistent? : Yes or No

L/Bal. 6 mm

L/Bal. 6 mm

Est. Repairs: days Res.: Yes or No

D.O.A. 28/2/18

D.O.I. 30/4/18

Lum Sum: % 3 Val.: Yes or No

Survey held at Crown Asia

CA / REV / REP. / 24 HRS

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

Vehicle: IN / OUT

Frt o/s

Date: Person Contacted:

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

Date / Time Action / Instruction

30/4/18 No Estimate.

Date/Time, File Pass to?

☐ : Preli. Report

Days Of Repair:

1)

☐ : Final Report

Resurvey No. of Trip:

Date/Time, File Return to?

Survey Fee:

2)

Add Fee: ☐ : Site Insp (\$)

Transportation:

☐ : Interview (\$)

Photos

☐ : Tech. Invs (\$)

Others

☐ : Weekend (\$)

TOTAL

Report Format :

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