

Form

REF: III

Ref: 18004413/R1hs3 62932

ASSIGNMENT

From _____ Date **7/13/18**

Estimated Cost _____

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

To inspect vehicle No. **SKQ 9126S**

at Workshop no. **Prime Auto**

of **6 Benoi place**

Insured _____

Policy No _____

Claims No _____

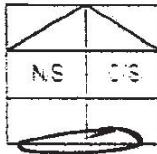
Sum Insured: _____ Excess _____

Client's Record **A I**

Make of Ver _____

(Policy Condition)

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



Sal or Market Value _____

IDAO Accident Report Consistent? : Yes or No

GLA PR Seen: Consistent? : Yes or No

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

Sum Sur: _____ % 3 Val: Yes or No

CA / REY / REP. / 24 HRS **wp**

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Van No **SKQ 9126S** Reg **2015 Jan**

Type **MC** / MCycle / Bus / Van / Lorry / Taxi / Prime Mover

Truck Trailer _____

Make **TOYOTA CAMRY 2.0 A** **1998**

Color **GREEN** Insured Stn N/A

Se Reg No **40733** T Reg Insured Stn N/A

Eng No _____

CN No **MR053BK5604025162**

Gen Cond. Good **(X)** Fair / Poor / Burnt

Steering / Order **(X)** Jammed / Leaked / Burnt or

Brake **(X)** Jammed / Leaked / Burnt or

Mod **(X)** Nil / S Rim / STD A/Rim or

Tyre Size **F 205/60R16**

R. **A**

BS / DUN EXNOVA BY FS LIZA / MC / HTSU PR SUM

TOYO / YOKO **GOODRIDE**

Front _____

Rear _____

R.Sa **6** mm

R.Sa **6** mm

L.Sa **6** mm

L.Sa **6** mm

D.O.A. **01/03/18**

D.O. **07/03/18**

Survey held at **PRIME AUTO**

Des. of Damages **Front** / Rear / OS / NS / UIC / Rooftop or

The UIC / Chassis frame Body Structure affected due to collision

Date Time Action / Instruction

Date/Time File Pass of ☐ : Preli. Report

☐ : Final Report

Date/Time File Return of

Days Of Repair: _____

Resurvey No. of Trial: _____

Survey Fee

Transportation

Lab. Fee

Other

Add Fee:

☐ Steered \$

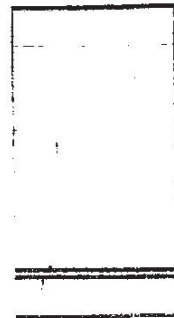
☐ Alignment \$

☐ Tech \$

☐ Seal \$

Report Format

Sum \$um IB



YOUR LOGO :

YOUR FAX NO. :

NO.	OTHER FACSIMILE	START TIME	USAGE TIME	MODE	PAGES	RESULT	*CODE
01	65152948	26 Feb. 11:03	00'45	SND	000	PRESSED THE 'STOP' KEY	
02	67480361	26 Feb. 11:05	02'41	SND	010	OK	
03	<FAX # NOT AVAIL.>	26 Feb. 11:31	01'00	RCV	006	OK	
04	<FAX # NOT AVAIL.>	26 Feb. 11:39	01'17	RCV	009	OK	
05	65152948	26 Feb. 17:07	01'17	SND	005	OK	
06	65152948	26 Feb. 17:16	01'23	SND	006	OK	
07	<FAX # NOT AVAIL.>	27 Feb. 11:36	01'38	RCV	011	OK	
08	65152948	27 Feb. 11:38	00'28	SND	001	OK	
09	<FAX # NOT AVAIL.>	27 Feb. 14:20	01'24	RCV	010	OK	
10	65152948	28 Feb. 13:05	00'47	SND	001	OK	
11	65152948	28 Feb. 13:11	00'52	SND	000	COMMUNICATION ERROR	43
12	<FAX # NOT AVAIL.>	28 Feb. 13:46	00'22	RCV	001	OK	
13	<FAX # NOT AVAIL.>	01 Mar. 10:38	01'43	RCV	012	OK	
14	<FAX # NOT AVAIL.>	01 Mar. 13:47	00'41	RCV	002	OK	
15	67480361	01 Mar. 14:08	00'50	SND	001	FAILED PICKUP	
16	67480361	01 Mar. 14:09	02'48	SND	013	OK	
17	65152948	01 Mar. 14:13	00'52	SND	002	OK	
18	<FAX # NOT AVAIL.>	01 Mar. 15:13	01'24	RCV	010	OK	
19	<FAX # NOT AVAIL.>	01 Mar. 17:47	00'59	RCV	005	OK	
20	65152948	02 Mar. 11:27	00'34	SND	001	OK	
21	65152948	02 Mar. 15:55	01'19	SND	004	OK	
22	65152948	05 Mar. 11:54	02'13	RCV	015	OK	
23	65152948	05 Mar. 13:12	02'21	SND	007	OK	
24	<FAX # NOT AVAIL.>	05 Mar. 14:32	01'10	RCV	008	OK	
25	<FAX # NOT AVAIL.>	05 Mar. 15:13	01'13	RCV	008	OK	
26	<FAX # NOT AVAIL.>	05 Mar. 15:45	00'16	RCV	001	OK	
27	<FAX # NOT AVAIL.>	05 Mar. 16:14	01'03	RCV	006	OK	
28	<FAX # NOT AVAIL.>	06 Mar. 11:37	01'12	RCV	008	OK	
29	65152948	06 Mar. 14:44	00'46	SND	002	OK	
30	<FAX # NOT AVAIL.>	06 Mar. 15:29	00'54	RCV	005	OK	

*CODE = FOR SERVICE CENTRE USE ONLY