

Ref. No : CS/TP 18004643 Uvb Res. Date: 1/3/18 Date Received:

Veh. No : SKU 9287 SP: _____ WKSP: Ry

C/No : _____

Action/Instruction:

1. File 2. Submit Photo? YES / NO

3. Indicate Res. Date On Photo Page? YES / NO Message:

If No, due to a) No authorisation b) Days of repair

others: _____

Final Re-inspection or Progress Photos

Inspected By: Ry

(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: 14800

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: 1 Consistent? : Yes or No

Est. Repairs: 6 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

9/11/2018
Vehicle: IN / OUT

Date: _____ Person Contacted: _____

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

Tyre Size: F: _____

R: 185/65R14

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

TOYO / YOKO or

Front

Rear

R/Bal. 6 mm

R/Bal. 6 mm

L/Bal. _____ mm

L/Bal. 6 mm

D.O.A. 9/3/18

D.O.I. 12/3/18

Survey held at _____

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

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
<u>20/3/18</u>	<u>n.g L7A 6825 met 79.75</u> <u>confirmed d/s @ 7800 with Alu. (Red 8793-72, 5390)</u>

RECEIVED 2 MAR 2018

Date/Time, File Pass to?

: Preli. Report

: Final Report

Days Of Repair: 6

Resurvey No. of Trip: 2

Date/Time, File Return to?

2) 20/3 - typist

Add Fee: : Site Insp (\$)

: Interview (\$)

: Tech. Invs (\$)

: Weekend (\$)

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

6x15=90

170+90

50

50+50

94

80

584

Report Format : TP

Lump Sum / I.B.I. (\$ 7800)