Surveyor Ram | REF: | 4557K

# ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SLH 3086Z

at Workshop m/s DING AUTO

of 249, JLN BOON LAY

Insured: AXA/MP

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: _____ days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SLH 3086Z Yr Regn: 2016 / OCT

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

Make: TOYOTA COROLLA ALTIS 1.6 c.c 1598

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

Sp.Reading 108296 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: MR053REH/04559092

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modi : 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 TRIANGLE

| Front | | Rear | |
|---|---|---|---|
| R/Bal. | 5 mm | R/Bal. | 5 mm |
| L/Bal. | 5 mm | L/Bal. | 5 mm |
| D.O.A. | 12/03/18 | D.O.I. | 15/03/18 |

Survey held at DING AUTO

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

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

| Date / Time | Action / Instruction |
|---|---|
| | |

Date/Time, File Pass to? ☐ : Preli. Report

1) _____ ☐ : Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____ ) ___S + RS ___SI

☐ : Interview ($ _____ )

☐ : Tech. Invs ($ _____ )

☐ : Weekend ($ _____ )

Survey Fee: _____

Transportation: _____

Photos _____

Others _____

TOTAL _____

Report Format : _____

Lump Sum / I.B.I: ($ _____ )