Surveyor

REF: ASM (AXA) 7907/ 2b3

ASSIGNMENT

From: Date: 15052018

Estimated Cost:

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

To Inspect Vehicle No: SJS 1147K

at Workshop m/s Toh Ah Swee

of Blk 3 Kranji Loop #01-02.

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: 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: SJS1147K. Yr Regn: 29/7/2009

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

Make: Kia Cerato Forte. c.c 1591

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

Sp.Reading 146440 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: KNAFH 221395088808.

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215/45R17 Falken.

R: " Nexen

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.	6 mm	L/Bal.	6 mm

D.O.A. 25/4/18. D.O.I. 15/5/18

Survey held at Toh Ah Swee

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:

Survey Fee:

Transportation

Add Fee: : Site Insp ($) S + RS SI

: Interview ($) Photos

: Tech. Invs ($) Others

: Weekend ($)

Report Format :

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

TOTAL