

REF: \_\_\_\_\_

DEC 2017

### ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To inspect Vehicle No: \_\_\_\_\_

at Workshop no: \_\_\_\_\_

of \_\_\_\_\_

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: **\$69K**

IDAC Accident Rpt \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen \_\_\_\_\_ Consistent? : Yes or No

Est. Repair: **14** days Res: Yes or No

Lump Sum: \_\_\_\_\_ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

Veh No: **GB69884X** Yr Regn: ~~DEC 2017~~

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

Truck / Trailer or \_\_\_\_\_

Make: **TOYOTA DYNA** cc: **2982**

Colour: **white** A/C: Insured / Std / NI / NA

Sp Reading: **19972** TRadio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: **JTFAF351X OK 209573**

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD A/Rim or

Tyre Size: F: **195/75/R15**  
R: **155/R12**

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or **B-S**

Front	Rear
R/Bal: <b>8</b> mm	R/Bal: <b>8</b> mm
L/Bal: <b>8</b> mm	L/Bal: <b>8</b> mm
D.O.A. _____	D.O.I: <b>14/5/2018</b>

Survey held at \_\_\_\_\_

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

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

Date / Time	Action / Instruction
	<b>Photos → MA CF → MA Hardisk → @3. Photo → 2018.5 → GB69884X</b>
25.06.2021	Submit final fig \$20,950.59 ; 14 days before excess \$800.00. (Red \$5,887.85 ; 22%)

  

Call/Time: File Pass off?	<input checked="" type="checkbox"/> Prel. Report	Days Of Repair:		
1)	<input type="checkbox"/> Final Report	Resurvey No. of Trip:		Survey Fee:
Call/Time: File Return off?				<b>390</b>
2)		Add Fee:	<input type="checkbox"/> Site Insp: 15 <input type="checkbox"/> Interview: 15 <input type="checkbox"/> Tech Insp: 15 <input type="checkbox"/> Unattended: 15	<b>390</b>
Report Format:				
Lump Sum / I.B.I: 15				