

Ref. No : CS/TP18009263/UT6⁰² Res. Date: 24/5/18 Date Received:

Veh. No : SLE 66106 SP: 716/18 WKSP: BW

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: J

(Policy Condition)

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

<input checked="" type="checkbox"/>	<input type="checkbox"/>
N/S	O/S

Bal. or Market Value: 92

IDAS Accident Report: _____ Consistent?: Yes or No

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

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

Lum Sum: 10 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

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

Tyre Size: F: 235/35ZR19

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / CO or

Front	<u>6</u>	Rear	<u>6</u>
R/Bal.	mm	R/Bal.	mm
L/Bal.	<u>6</u>	L/Bal.	<u>6</u>
	mm		mm
D.O.A.	<u>17/5/18</u>	D.O.I.	<u>22/5/18</u>

Survey held at _____

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

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

Date / Time	Action / Instruction
	<u>LTA 61652</u>
	<u>Nive Ajax partic/new parts replaced.</u>
	<u>huge lower chrome assembly 3pc</u>
	<u>Repair sum #10200 Ured: 4343.48; (33%) 32%</u>

RECEIVED 19 JUN 2018

Date/Time, File Pass to? Prel. Report

1) 19/6 Typist Final Report

Date/Time, File Return to? _____

2) _____

Report Format : TP

Lump Sum / I.B.I. (\$) 9200

Days Of Repair: 6

Resurvey No. of Trip: 3

Add Fee: Site Insp (\$)

Interview (\$)

Tech. Invs (\$)

Weekend (\$)

Survey Fee: 5x15=75

Transportation: 170+75

\$ + RS, SI 50

Photos 50+50+50

Others 104

80

TOTAL 629