

ASSIGNMENT

From

Date:

12/7/2019

Estimated Cost:

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

To Inspect Vehicle No:

GBG 72574

at Workshop m/s

CYS Automobile

of

38 woodlands Ind. park E1 #07-17

Insured:

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

11am

(Policy Condition)

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

☒	☒
N/S	O/S
☐	☐

Bal. or Market Value:

IDAC Accident Rpt:

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

sup

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

GBG 72574

Yr Regn:

12/10/17

Type: ☒ M.Car / ☐ M.Cycle / ☐ Bus / ☐ Van / ☐ Lorry / ☐ Taxi / ☐ Prime Mover /

Truck / Trailer or

Make:

NISSAN NV 200

C.C

1461

Colour

Silver

A/C:

Insured / Std / NI / NA

Sp.Reading

50750

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

VSKY3AM202 0146347

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:

175/70R14

R:

11

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

TOYO / YOKO or

GAENLANOEN

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

25/5/18

D.O.I.

12/7/19

Survey held at

CYS

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

MR-SSK

Date/Time, File Pass to?

☐

: Prel. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

3 + RS. \$

Photos

Others

TOTAL

Add Fee:

☐

: Site Insp (\$)

☐

: Interview (\$)

☐

: Tech. Insp (\$)

☐

: Weekend (\$)

Report Format:

Lump Sum / L.P.R.