

Surveyor

Kml

REF: *LPC*

1635J

ASSIGNMENT

From: _____ Date: *7/11/2018*

Estimated Cost: _____

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

To inspect Vehicle No: *SLU 2199U*

at Workshop m/s: *Borneo Motor*

of: *17 Ubi Rd 4*

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: *Sam*

After 9am

(Policy Condition)

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

<i>G</i>	
N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : **Yes** or **No**

GIA / PR Seen: _____ Consistent? : **Yes** or **No**

Est. Repairs: *3* days Res.: **Yes** or **No**

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

CA / REV / REP. / 24 HRS *Wp*

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: *SLU 2199U* Yr Regn: *27 Nov 2017*

Type: M.Cas / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: *Toyota wish* c.c. *1798*

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

Sp. Reading: *86921* T/Radio: **Insured** / Std / NI / NA

Eng/No: _____

C/No: *JTDG620W90J008229*

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In/Out / Jammed / Leaked / Burnt or _____

Brake: In/Out / Jammed / Leaked / Burnt or _____

Modi: **Nil** / S/Rim / STD / Rim or _____

Tyre Size: F: *195/65 R15*

R: *"*

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. _____ D.O.I. *07-11-18*

Survey held at *w/s* *11AM*

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

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

Date / Time	Action / Instruction
	<i>\$2014.7</i>

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

1) : **Final Report**

Date/Time, File Return to? _____

2) _____

Report Format : _____

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

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

_____ S + RS, _____ SI

Photos _____

Others _____

TOTAL _____

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech. Invs (\$ _____)

: Weekend (\$ _____)