(08/11/13) REF:	9820 C
Simeyor: ASSIC	GNMENT
From: Date: .	Veh No: SLD 439E Yr Regn: 20/6 / MM44
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD (TP)WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No: SLO 4396	Make: Vorksmaran holf 1.4 c.c (398
at Workshop m/s Volks with a	Colour R60 A/C: Insured / Std / NI / NA
of 247, MEXAMORA RO	Sp.Reading 27240 T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	C/No: WV W222 AU ZGW 275 /32
Claims No.	Gen. Cond: Good Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: horder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / SRim / STD A/Rim or
1.44	Tyre Size: F: 228 35 Rth
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S	BS/DUN/EXNOVA/GY/FS/LIZA/MIC/OHTSU/PIR/SUMI/
repair at the time of inspection.	TOYO / YOKO or
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Balmm R/Balmm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. 6 mm L/Bal. 6 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 28 8 18 D.O.I. 29/88/18
Lum Sum: % 3 Val.: Yes or No	Survey held at Volks worker
CA / REV / REP. / 24 HRS	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT	O/S FRT
Date:Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
	<u> </u>
Date/Time, File Pass to? : Preli. Report	Days Of Repair:
1) : Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
2) Add Fee	: Site Insp (\$)s+Rs,si
	: Interview (\$) Photos
Report Format :	: Tech. Invs (\$) Others
Lump Sum / I.B.I: (\$: Weekend (\$

TOTAL