(08/11/13)

Surveyor: Kelvin

REF: NS/INC18017766/Kirber

# ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Insped Vehicle No: _____

at Workshop m/s _____

of _____

Insured: SLK 2816A

Policy No. 5087648427-01 12012018-11012019

Claims No. MT/1013171-002

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

| N/S | O/S |
|---|---|
| | |

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

Bal. or Market Value: _____

IDAC Accident Rport: _____ 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

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SHC 7814L Yr Regn: 18 July 2013

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or

Make: Hyundai Sonata c.c 1994

Colour Yellow A/C: Insted / Std / NI / NA

Sp.Reading 524081 T/Radio: Insted / Std / NI / NA

Eng/No: _____

C/No: KMHET41VMPA 834588

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: 215/60R16

R: -

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

| Front | | Rear | |
|---|---|---|---|
| R/Bal. | 7 mm | R/Bal. | 7 mm |
| L/Bal. | 7 mm | L/Bal. | 7 mm |
| D.O.A. | 26/9/18 | D.O.I. | 1/10/18 |

Survey held at CDHE (Loyang)

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

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

| Date / Time | Action / Instruction |
|---|---|
| | SHC 7814L - CS/FCL/7006540/RHh302 DOA: 30/03/2017 INC |
| | SLK 2816A - CS/FCL18017620/d3 DOA: 26/09/2018 4/s |
| 2/10/18 | Called PKP & 375/ 2 Hrs, |
| | Rec: $190,331. |

RECEIVED 04 OCT 2018

Date/Time, File Pass to? 1) typist

Date/Time, File Return to? 2)

☐ : Preli. Report

☑ : Final Report

Days Of Repair: 2

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ : Tech. Invs ($ _____)

☐ : Weekend ($ _____)

Report Format : TP

Lump Sum / I.B.I: ($ 375.00)

| | |
|---|---|
| Survey Fee: | 160 |
| Transportation: | |
| S + RS S | |
| Photos | |
| Others | |
| TOTAL | 160 |