grasslac	ange	$A \times A$
, -	V	ASSIGNMENT
From:	Date:	Veh No: SDY 2075 Yr Regn: 7016, 00
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		Make: Nisson, X-frail. c.c 199 Colour Black A/C: Insured/Std/NI/N
at Workshop m/s		Colour Back A/C: Insured / Std / NI / N
of		Sp.Reading 5487 T/Radio: Insured / Std / NI /
Insured		Eng/No:
Policy No.		C/No: JM JAT 327 0001665
Claims No.		Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured:	Excess:	Steering: Inordey/ Jammed / Leaked / Burnt or
(Client's Record)		Brake: Inorder Jammed / Leaked / Burnt or
Make of Veh:		Modi: Nil / SKRim / STD A/Rim or
		Tyre Size: F: 225 / 60/P(8
(Policy Condition		R: Ala
	had commenced its N/S	O/S BS / DUN EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at	t the time of inspection.	TOYO/YOKO or
Bal. or Market Valu	ue: Ag 2K.	Front
IDAC Accident Rp		R/Bal. mm R/Bal.
GIA / PR Seen:	Consistent? : Yes or No	L/Bal. (2 mm L/Bal. (
Est. Repairs:	days Res.: Yes or No	D.O.A. D.O.I. 3/10/18PH
Lum Sum:	% 3 Val.: Yes or No	Survey held at TC lung Hee
04 / 55/ / /	1-3 pm	Des. of Damages : Frt / Rear / O/S //N/S / U/C / Rooftop or
CA / REV / F	Vehicle: IN	
Date:	Person Contacted: Slavn	The U/C / Chassis frame / Body Structure affected due to colli
Date / Time	Action / Instruction	•
	-	
Date/Time, File Pass to	02	Days Of Panaire
Date Hille, Hile Fass II	: Preli. Report	Days Of Repair:
1)	: Final Report	Resurvey No. of Trip: Survey Fee:

Date/Time, File Pass to?	: Preli. Report	Day	s 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 (\$		
		house	and a	TOTAL	-