

Surveyor: Tan JiaREF: EQ18604/Tha 3-14

ASSIGNMENT

From: _____ Date: 23.10.2018

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MVTo Inspect Vehicle No: SKH 6852Bat Workshop m/s Carcraftersof 4S Toh Guan Rd East #05-155

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.before 12pm

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

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SKH 6852B Yr Regn: 2012 / SepType: Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Volkswagen Tiguan C.C. 1984Colour: Silver

A/C: Insured / Std / NI / NA

Sp. Reading: 59759

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WVG2275N EDW 000 780Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 235/55R17

R: _____

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

TOYO / YOKO or

Front

Rear

R/Bal. 6 mmR/Bal. 6 mmL/Bal. 6 mmL/Bal. 6 mm

D.O.A. _____

D.O.I. 23/10/18 @ 1145Survey held at CarcraftersDes. 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

Date/Time, File Pass to?

☐ : Preli. Report

Days Of Repair: _____

1)

☐ : Final Report

Resurvey No. of Trip: _____

Date/Time, File Return to?

2)

Add Fee: ☐ : Site Insp (\$)

Survey Fee: _____

Transportation: _____

☐ : Interview (\$)

Photos

☐ : Tech. Invs (\$)

Others

☐ : Weekend (\$)

TOTAL

Report Format : _____

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