

100/11/13
Surrey

Tanful

REF: EOL

Input: 1-8

ASSIGNMENT

From: _____ Date: 27.12.2018
Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
To Inspect Vehicle No: SKJ 4156A
at Workshop m/s: Mova
of: Blk 1008 Bukit Merah Lane 3 # 01-04
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.

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 'DS'

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SKJ4156A Yr Regn: 2009, May.
Type: M.Cap / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or
Make: Mazda3 C.C. 1999
Colour: Silver A/C: Insured / Std / NI / NA
Sp. Reading: 151252 T/Radio: Insured / Std / NI / NA
Eng/No: _____
C/No: SM 68L10F1A906027
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: 225/45K7
R: 27

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

Front Rear
R/Bal. 0 mm R/Bal. 6 mm
L/Bal. 6 mm L/Bal. 6 mm
D.O.A. D.O.I. 27/12/18
Survey held at Mova BM

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

Frt o/s

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

Date / Time Action / Instruction

Date/Time, File Pass to?

☐ : Preli. Report

☐ : Final Report

Date/Time, File Return to?

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee: ☐ : Site Insp (\$)

☐ : Interview (\$)

☐ : Tech. Invs (\$)

☐ : Weekend (\$)

) \$ + RS. \$

) Photos

) Others

Report Format :

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

TOTAL