n2

Ref. No : CS/TP1802270/Uvd3 Res. Date: 1/1/18	Date Received:
Veh. No : SWJ 6668H SP:	WKSP:
C/No :	
Action/Instruction:	
1.File 2.Submit Photo? YES / NO	
3.Indicate Res. Date On Photo Page? YES / NO	Message:
If No, due to a) No authorisation b) Days of repair	
others:	
Final Re-inspection or Progress Photos	Inspected By:

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 Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 4 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS L1A 840740

Vehicle: IN / OUT

Date: Person Contacted:

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

Tyre Size: F: 245/50R18

R:

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.	29/11/18	D.O.I.	10/12/18

Survey held at —

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

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

Date / Time	Action / Instruction
	L1P?
13/12/18	L/S $5300 (Red 4281.95, 45%)

RECEIVED 13 DEC 2018

Date/Time, File Pass to? ☐ : Preli. Report ☐ : Final Report

1)

Date/Time, File Return to?

2) 13/12 - typist

Days Of Repair: 4

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp ($) ☐ : Interview ($) ☐ : Tech. Invs ($) ☐ : Weekend ($)

Report Format : TP

Lump Sum / I.B.I: ($ 5300/=)

Survey Fee:	170
Transportation:	50
___S + RS, ___SI	50 + 50
Photos	52 + 6
Others	80
TOTAL	402

458