

12

Ref. No : CS/TP/18022170/Uvd3 Res. Date: 11/12/18 Date Received: _____

Veh. No : SK176668H SP: _____ WKSP: B

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: _____

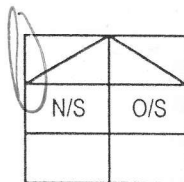
Final Re-inspection or Progress Photos

Inspected By: _____

Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: 2 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

11A 80740
Vehicle: IN / OUT

Date: _____ Person Contacted: _____

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

Tyre Size: F: _____

R: _____

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

Front

R/Bal. 6 mm

L/Bal. 6 mm

D.O.A. 29/11/18

Survey held at _____

Rear

R/Bal. 6 mm

L/Bal. 6 mm

D.O.I. 10/12/18

Des. 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
13/12/18	LIP L/S \$5300 (Red 4281.95, 45%)

RECEIVED 13 DEC 2018

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

1) ☐ : Final Report

Date/Time, File Return to?

2) 13/12 - typist

Report Format : TP

Lump Sum / I.B.I. (\$) 5300 1/2)

Days Of Repair: 4

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Invs (\$ _____)

☐ : Weekend (\$ _____)

Survey Fee: 170

Transportation: 50

S + RS, SI 50 + 50

Photos 52 + 6

Others 80

TOTAL

170
50
50 + 50
52 + 6
80
<u>402</u>

458