arregor Tangles REF: III		
V	ASSIGNMENT	
From: Date: 27   18   Estimated Cost:	Veh No. SHA 926/6/ Type: M.Car / M.Cycle / Bus / Van	Yr Regn; 20/8 / Aug
OD (TP) WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or	· 160 A
To Inspect Vehicle No: SHA 9261 D	Make: Hyundi lon. Colour yellow.	ig c.c /880
at Workshop m/s Ding Auto		189
at Workshop m/s  Ding Auto  of 31 Cor porution Road	Sp.Reading 43601	T/Radio: Insured / Std / NI / NA
Insured: 1	Eng/No:	10.1011 1.07212
Policy No.	^	1CVKY 107267.
Claims No.	Gen. Cond. Good / Fair / Poor / Bu	
Sum Insured: Excess:	Steering: Inorder / Jammed / Leak	
(Client's Record)	Brake: Inorder / Jammed / Leake	
Make of Veh:	Modi: Nil S/Rim / STD A/Rim	
	Tyre Size: F: (9)	5/65R15.
(Policy Condition)	R:	
	O/S BS / DUN / EXNOVA / GY / FS / LIZ	A MIC OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO or	
Bal. or Market Value:	Front	Rear
DAC Accident Rport: Consistent? : Yes or No	R/Bal. 6 mm	R/Bal. mm
GIA / PR Seen: Consistent?: Yes or No	L/Bal. 6 mm	L/Bal. mm
Est. Repairs: days Res.: Yes or No	D.O.A.	D.O.I. 47/2/8
_um Sum: % 3 Val.: Yes or No	Survey held at Ding	Auto.
CA / REV / REP. / 24 HRS UP)	Des. of Damages : Frt / Rear / O/	
Vehicle: IN /		ols , Rear No
Date: Person Contacted:	The U/C / Chassis frame / Bo	ody Structure affected due to collision.
Date / Time Action / Instruction		
ate/Time, File Pass to? : Preli. Report	Days Of Repair:	
: Final Report	Resurvey No. of Trip:	Survey Fee:
Date/Time, File Return to?	-	Transportation:
Add	Fee: Site Insp (\$	)S+RSSI
	: Interview (\$	) Photos
Report Format :	Tech. Invs (\$	) Others
ump Sum / LR I: (\$	2) January (\$	

TOTAL .