

REF: ASM(AXA)

ASSIGNMENT

SKT 9695A

06 15

From:

Date:

13/2/19

Estimated Cost

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No.

SKT 9695A

at Workshop m/s

Accord Auto

of 10 Amk Ind. park 2A # 03-11

Insured

Policy No.

Claims No.

Sum Insured:

Excess:

(Client's Record)

Make of Veh:

Morning

(Policy Condition)

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

N/S	O/S

Bal. or Market Value:

865k

IDAC Accident Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 01 days Res.: Yes or No

Lum Sum: 1.21 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS (up)

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No

Type: M/Car / M/Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

N/S Juke

C.C.

1598

Colour

M.P. White

A/C Insured / Std / NI / NA

Sp. Reading

97532

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

STNFB AF154 7107175

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:

R:

215/55R17

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

TOYO / YOKO or

Falken

Front

Rear

R/Bal. 2 mm

R/Bal. 2 mm

L/Bal. 2 mm

L/Bal. 2 mm

D.O.A. 28/12/18

D.O.I. 13/12/18

Survey held at

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

O/S M

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

Date / Time

Action / Instruction

Date/Time, File Pass to?

☐

Preli. Report

1)

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation

) \$ + RS \$

) Photos

) Others

TOTAL

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Report Format :

Lump Sum / L.B. : (\$