Tanjitlh | REF: AXA- 506 / 14

From: Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s:

of:

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: 99 6K.

IDAC Accident Rport: 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 'WP'

CA / REV / REP. / 24 HRS .

Vehicle: IN / OUT

Date: Person Contacted: Then

Veh No: SLK 6490D. 1st Regn: 2017 Jan.

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or

Make: BMW 216D c.c: 1496

Colour: Grey A/C: Insured / Std / NI / NA

Sp.Reading: 79186. T/Radio: Insured / Std / NI / NA

Eng/No: WBA2E32040SB45778.

C/No:

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: 205/55R17

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.			D.O.I.	19/2/19 @ 4.25pm	

Survey held at: PWL

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

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

1) ☐ : Final Report

Date/Time: File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ Site Insp. : ($
☐ Interview : ($
☐ Technical : ($
☐ Wash and : ($

Survey Fee

Transportation

1) S+B S

2) Photos

3) Other

Total

Report Format :

Lump Sum / I.B.E / S