

Surveys

REF:

AIG

ASSIGNMENT

From:

Date:

27/1/19

Estimated Cost:

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

To Inspect Vehicle No:

SLH 3311Z

at Workshop m/s

Hup Lay Huat

of Blk 1, Kaki Bukit Ave 6, #01-35

Insured:

Policy No.

Claims No.

Sum Insured:

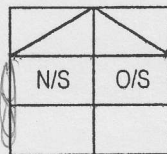
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

6 days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SLH 3311Z

Yr Regn:

7/10/2016

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

Truck / Trailer or

Make:

Toyota Harrier Elegance 2.0 C.C 1986

Colour:

Black

A/C: Insured / Std / NI / NA

Sp. Reading

29539

T/Radio: Insured / Std / NI / NA

Eng/No:

38RB837006

C/No:

ZSUG00084355

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: 225/65R17

R: 225/65R17

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

TOYO / YOKO or

Front

Rear

R/Bal.

7

mm

R/Bal.

7

mm

L/Bal.

7

mm

L/Bal.

7

mm

D.O.A.

25/1/19

D.O.I.

27/1/19

Survey held at

Hup Lay Huat

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

MV 93,000/2
PV 62,071/2
NV 30,929/2

Date/Time, File Pass to?

☐

: Preli. Report

☐

: Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair:

6

Resurvey No. of Trip:

1

Survey Fee:

Transportation:

Add Fee:

☐

: Site Insp (\$

) \$ + RS. \$

☐

: Interview (\$

) Photos

☐

: Tech. Invs (\$

) Others

☐

: Weekend (\$

)

Report Format :

DAR

Lump Sum / I.B.I: (\$

TOTAL

8/4/19