REF: ASM(AXA)

ASSIGNMENT

From: Date: 13/2/19

Estimated Cost:

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

To Inspect Vehicle No: SJL 3605D

at Workshop m/s: WTS Automotive

of: 17 Kaki Bukit Rd 4 # 01-58 (pitstop)

Insured:

Policy No:

Claims No:

Sum Insured: Excess:

(Client's Record)

Make of Veh: After 12pm Idram

(Policy Condition)

N/S	O/S

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

Bal. or Market Value:

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

CA / REV / REP. / 24 HRS up

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SJL3605D- Yr Regn: 2008 Nov

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

Make: Toyota Altis c.c: 1598

Colour: White. A/C: Insured / Std / NI / NA

Sp.Reading: 106062. T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: MR0532EE1061263O.

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inoudor / Jammed / Leaked / Burnt or

Brake: Inoudor / Jammed / Leaked / Burnt or

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

Tyre Size: F: 195/65R15

R: 195/65R15.

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

Front			Rear		
R/Bal.	06	mm	R/Bal.	06	mm
L/Bal.	06	mm	L/Bal.	06	mm
D.O.A.			D.O.I.	13/02/19.	

Survey held at: Pit stop (WTS).

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
	TPAXA.

COE Expiry: 24/11/23.

MV: 28K
PV: 4.2K
Nett: 13.8K

Date/Time, File Pass to? 1) ☐ : Preli. Report ☐ : Final Report

Date/Time, File Return to? 2)

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ Site Insp ($) ☐ Interview ($) ☐ Tech. Invs ($) ☐ Weekend ($)

Survey Fee:

Transportation: (S + RS S)

(Photos

(Others

( )

TOTAL

Report Format:

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