Surveyor: Taufik | REF: ALG. 23371 T1 (b).

ASSIGNMENT

From: Date:

Estimated Cost:

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

To inspect Vehicle No:

at Workshop to/:

of

Insured:

Policy No:

Claim: 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:

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

Date: Person Contacted: Vehicle: IN / OUT Park.

Veh No: SLZ 7356Z Yr Regn: 2018 May.

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

Make: Land Rover Discovery C.C: 1997

Colour: Silver A/C: Insured / Std / Nil / NA

Sp.Reading: 14041 T/Radio: Insured / Std / Nil / NA

Eng/No:

C/No: SALCA2AX8JH760643.

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: 235/60R18

R: 4 on

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.		D.O.I.	11/3/19

Survey held at: Weames Leng Hee

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 Passs to?

1)

Date/Time: File Return to?

2)

☐ : Preli. Report

☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

1) S+PS S

2) Photos

3) Other

4)

TOTAL

Add Fee: ☐ : Site Insp ($

☐ : Interview ($

☐ : Tech. Invs ($

☐ : Weekend ($

Report Format:

Lump Sum / LB 1: ($