

REF:

AXA

ASSIGNMENT

From:

Date: 11/3/19

Estimated Cost:

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

To Inspect Vehicle No:

SJH 4690X

at Workshop m/s

Torque 5

of

8 Kaki Bukit Ave 4, Premier

Insured:

Policy No.

Claims No.

Sum Insured:

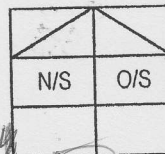
Excess:

(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:

8

days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SJH 4690X

Yr Regn: 8/8/2008

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

Truck / Trailer or

Make:

TOYOTA COROLLA AXIO

C.C 1426

Colour:

GREY

A/C: Insured / Std / NI / N

Sp. Reading

172890

T/Radio: Insured / Std / NI / N

Eng/No:

INZD084385

C/No:

NZE1416085483

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: 205/50R16

R: 205/50R16

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

TOYO / YOKO or

Front

Rear

R/Bal.

7

mm

R/Bal.

7

L/Bal.

7

mm

L/Bal.

7

D.O.A.

8/3/19

D.O.I.

11/3/19

Survey held at

Torque 5

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

Range 8,000/2 - 10,000/2

L/S - \$5750 (Red \$8331.88 / 59%)

TGLim 3/6/19

MV 23,000/2

PV 15,085/2

NV 7,915/2

TGLim lim
26/3/19

Date/Time. File Pass to?

☐

Preli. Report

1)

Date/Time. File Return to?

☐

Final Report

2)

Report Format :

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

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

) \$ + RS. SI

) Photos

) Others

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

TOTAL