

Ref. No : <u>CS/TP1901172/Agd3</u>	Res. Date: <u>4/7/18</u>	Date Received:
Veh. No : <u>SKS 6076L</u>	SP:	WKSP: <u>Am</u>
C/No :		
Action/Instruction:		
1.File	2.Submit Photo?	YES / NO
3.Indicate Res. Date On Photo Page?	YES / NO	Message:
If No, due to a) No authorisation b) Days of repair		
others:		
Final Re-inspection or Progress Photos		Inspected By: <u>[Signature]</u>

Make of Veh:

(Policy Condition)

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

Bal. or Market Value:

IDAC Accident Report:

GIA / PR Seen:

Est. Repairs:

Lum Sum:

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

N/S	O/S

Consistent? : Yes or No

Consistent? : Yes or No

Res.: Yes or No

3 Val.: Yes or No

L7A 51665

Vehicle: IN / OUT

Modi: NIL / 0/KM / 012/1111

Tyre Size:

F:

R:

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

Front

R/Bal.

L/Bal.

D.O.A.

Survey held at

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Rear

R/Bal.

L/Bal.

D.O.I.

Date / Time

Action / Instruction

Date/Time, File Pass to?

1) 08/7/18

Date/Time, File Return to?

2)

Report Format :

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

☐ : Preli. Report

☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

☐ : Site Insp (\$

☐ : Interview (\$

☐ : Tech. Invs (\$

☐ : Weekend (\$

Survey Fee:

Transportation:

☐ S + RS ☐ SI

☐ Photos

☐ Others

TOTAL

7x15 = 105
170 + 105
50
50
103
80
558

RECEIVED 06 JUL 2019

1/5 x 9000 (Red to 8652.51, 49%)

Dep 15 inc Ajax 2yrs bul. net 1433