

ASS. REC. BY:

REF:

Adrian

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

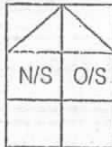
Excess:

(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:

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No: SGQ463IE Yr Regn: 2007 / Jan.Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Suzuki APV

C.C

1590

Colour

Grey

A/C:

Insured / Std / NI / NA

Sp.Reading

216033

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

MHYGDN71V00105220Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim or

Tyre Size: F:

185R14C

R:

185R14C

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

TOYO / YOKO or

Povelo

Front

Rear

R/Bal.

06

mm

R/Bal.

06

mm

L/Bal.

06

mm

L/Bal.

06

mm

D.O.A.

D.O.I.

31/07/19

Survey held at

MG Solution

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

Rees N/S

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

Date / Time

Action / Instruction

TP A16.COE Expiry: 16/01/22.MV: 16.2K (Depreciation \$65K x 2.5yrs = 16.2K)PV: 12.5KNett: 3.7K.

Date/Time, File Pass to?

Date/Time, File Return to?

1)

2)

3)

4)

5)

6)

Prel. Report:

Final Report:

Part Prices Check:

IN

OUT

Survey Fee:

Date:

Basic & Add.

S + RS, SI

Photos

Others

TOTAL