ASS. REC. BY: Rama | REF: | 828K

ASSIGNMENT

From: | Date: 23.9.2019

Estimated Cost:

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

To Inspect Vehicle No: SMA 9821D

at Workshop m/s MOVA

of 1008, BUKIT MERAH LANE 3 #01-04

Insured: EQ1

Policy No.

Claims No.

Sum Insured: | Excess:

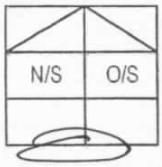
(Client's Record)

Make of Veh:

Change to 23/09/19

(Policy Condition)

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

Vehicle: IN / OUT

Date: | Person Contacted:

Veh No: SMA 9821D | Yr Regn: 2018 / Jun

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

Make: TOYOTA VOXY HYBRID 1.8 | c.c 1797

Colour WHITE | A/C: Insured / Std / NI / NA

Sp.Reading 69010 | T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: ZWR8003188S2

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 195/65R15

R:

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.	30/08/19	D.O.I.	23/09/19

Survey held at MOVA (BM)

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 Pass to?

1)

Date/Time, File Return to?

2)

☐ : Preli. Report

☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

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

Report Format :

Lump Sum / I.B.I. (%

Survey Fee:	
Transportation:	
$ + RS $ SI	
Photos	
Others	
TOTAL	