

ASS. REC. BY:

REF:

A19

Khaanchua

ASSIGNMENT

From:

Date:

5/11/19

Estimated Cost:

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

To Inspect Vehicle No:

SKM 6725D

at Workshop m/s

Team Autopro

of

160 Sin Ming Drive # 01-14

Insured:

Policy No.

Claims No.

Sum Insured:

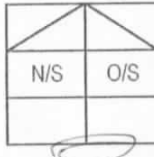
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

18,000/2

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

5

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Imp

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SKM 6725D

Yr Regn:

30/3/2010

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

Truck / Trailer or

Make:

Honda Stream RSZ

c.c 1799

Colour

Black

A/C:

Insured / Std / NI / NA

Sp. Reading

230582

T/Radio:

Insured / Std / NI / NA

Eng/No:

R18A13850436

C/No:

JHMRN68809C200436*

Gen. Cond: Good / Fair / Poor / Burnt

Steering: ☒ In order / Jammed / Leaked / Burnt orBrake: ☒ In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

225/45/17

R:

225/45/17

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

TOYO / YOKO or

Front

Rear

R/Bal.

5

mm

R/Bal.

5

mm

L/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

4/11/19

D.O.I.

5/11/19

'Survey held at

Team Autopro

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

HS 4700/2

Team Lin 15/11/19

MV 18,000/2

PV 14,350/2

NV 3,650/2

Team Lin

7/11/19

Date/Time, File Pass to?



Preli. Report

1)



Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Weekend (\$

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Report Format :

Lump Sum / L&I: (\$