BY:

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.

N/S	O/S

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: SJP8606. | Reg: 2008 Oct

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

Make: Meredes Benz SLK200 cc: 1796

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

Sp.Reading: 123802 | T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: WDB1714452F209659.

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: 225/35R19.
R: 225/35R19.

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

Front			Rear		
R/Bal.	06	mm	R/Bal.	06	mm
L/Bal.	06	mm	L/Bal.	06	mm

D.O.A. | D.O.I. 31/12/19.

Survey held at: Ace Autolution.

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
	TP Budget Direct. COE Expiry: 23/10/28.
	Lump Sum $2300 (Red 466057: 66%)
	MV: 65k
	PV: 28.5k
	Nett: 36.5k

Date/Time, File Pass to:
1) 8/5 Typist

[ ] Preli. Report
[✓] Final Report

Days Of Repair: 2

Resurvey No. of Trip:

Date/Time, File Return to:
2)

Add Fee: [ ] Site Insp. [ ] Interview [ ] Tech. [ ]

Survey Fee:
Transportation

Report Format:
Lump Sum: (0) 2300/-