

Merimn

ASSIGNMENT

From: _____ Date: 3/1/2020
Estimated Cost: _____
☒ OD / ☐ TP / ☐ WS / ☐ TP RES / ☐ OD RES / ☐ EVA / ☐ INV / ☐ MV
To Inspect Vehicle No: SJB 20M
at Workshop m/s Premium
of 55 ubi Road 1
Insured: _____
Policy No. _____
Claims No. _____
Sum Insured: _____ Excess: 1BA0.00
(Client's Record)
Make of Veh: 11am

(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: 05 88.5 days Res.: Yes or No
Lum Sum: _____ % 3 Val.: Yes or No
CA ☒ REV / REP. / 24 HRS
Date: _____ Person Contacted: _____ Vehicle: IN / OUT

N/S	O/S

Veh No: SJB 20M Yr Regn: 2019/ June
Type: ☒ M.Car / ☐ M.Cycle / ☐ Bus / ☐ Van / ☐ Lorry / ☐ Taxi / ☐ Prime Mover /
Truck / Trailer or
Make: Audi A5 SB c.c 1984
Colour: Bronze A/C: Insured / Std / NI / NA
Sp. Reading: 4713 T/Radio: Insured / Std / NI / NA
Eng/No: _____
C/No: WAUZZZF52KA052826.
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: 255/35R19.
R: 255/35R19.
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. 03/01/20
Survey held at Premium
Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Front o/s.
The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	Front A19 OD.
	SJB 20M - X
	6/1 - Revert via menmen
	6/1 - 16:16 - inform by victor authorise repair
	6/1 - 5:09pm email authorise repair excess \$0
	MV: 1741K
	PV: 171.4K
	Nett: 102.6K
	Confirm repair cost of \$11,523.44, 5days
	Red: \$13458.56; 53%)

Date/Time, File Pass to? ☐ : Preli. Report

1) ☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 5

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp (\$)

☐ : Interview (\$)

☐ : Tech. Insp (\$)

☐ : Weekend (\$)

Survey Fee:

Transportation:

3 + PS, SI

Photos

Others

TOTAL

Report Format:

Lump Sum / L.B./C 11,523.44