

ASSIGNED BY:

REF: 401

Veron

ASSIGNMENT

From: _____ Date: 6-Jan-2020

Estimated Cost: _____

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

To Inspect Vehicle No: 4P 3048M

at Workshop n/s Team Auto pro

of 160 sin ming Dr # 01-14

Insured: _____

Policy No: _____

Claims No: _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

Veh No: 4P 3048M Yr Regn: 20/6/2016

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

Truck / Trailer or _____

Make: Hino XZU710R cc 4003

Colour: White A/C: Insured / Std / NI / NA

Sp. Reading: 197362 T/Radio: Insured / Std / NI / NA

Eng/No: N04C453H10K017266

C/No: JHHUCS3H1017266

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or _____

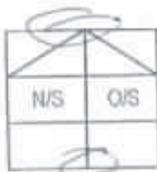
Brake: In order / Jammed / Leaked / Burnt or _____

Modi: Ni / S/Rim / STD A/Rim or _____

Tyre Size: F: 7.0 X 16
R: 7.0 X 16

(Policy Condition)

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



Bal. or Market Value: 48,000/2

IDAC Accident Rpt: _____ Consistent?: Yes or No

GIA / PR Seen: _____ Consistent?: Yes or No

Est. Repair: 14 days Res: Yes or No

Lum Sum: _____ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS 14

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

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

TOYO / YOKO or _____

Front	Rear
R/Bal. <u>6</u> mm	R/Bal. <u>6</u> mm
L/Bal. <u>6</u> mm	L/Bal. <u>6</u> mm
D.O.A. <u>3/1/2020</u>	D.O.I. <u>6/1/2020</u>

Survey held at Team Auto pro

Des. of Damages: FR / Rear / O/S / N/S / UIC / Rooftop or _____

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	Range 12,000/2 - 13,000/2
	Finalized with KC of Team Auto pro @ 11,250/2 with 14 repair delays. (Red 23,508.09, 6670) Total bill 7/2/2020
	4S 10,850/2 <u>Team Auto pro</u> 21/1/2020
	MV 48,000/2
	PV 25,600/2
	NV 22,396/2

RECEIVED 13 FEB 2020

Date/Time, File Pass to? Prell. Report

1) Final Report

Days Of Repair: 14

Resurvey No. of Trip: 2

2) 13/2 - typist

Add Fee: Site Insp (\$) _____

Interview (\$) _____

Tech. Invs (\$) _____

Weekend (\$) _____

Survey Fee:	250 + 625
Transportation:	60
Other:	80 + 80 + 80 + 80
	85
	580
	850
	14/2/20
TOTAL	1340

Report Format: TP

Lump Sum / M.R. is: 11,850/2