

REF: CC3/A1G 200 00 879/Acf3

ASSIGNMENT

From:

Date:

14/01/2020

Estimated Cost:

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

To Inspect Vehicle No:

SKH 9813P

at Workshop m/s

premium

of

55 ubi Road 1

Insured:

Policy No.

2100329576

Claims No.

380088451786

Sum Insured:

Excess:

\$800

(Client's Record)

Make of Veh:

3pm

(Policy Condition)

Remark: The veh had commenced its

repair at the time of inspection.

N/S	O/S

Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

03 888 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:

SKH 9813P

Yr Regn:

2013 Jan.

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

Truck / Trailer or

Make:

Andi AT.

C.C

1798

Colour

Gold

A/C:

Insured / Std / NI / NA

Sp.Reading

108099

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

WAU2228K6DA 057923.

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

225/50R17

R:

225/50R17

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.

14/01/20

Survey held at

Premium

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Front N/S.

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

DD AIG

SKH 9813P-X

15/01/20

@ 09:14 am revised PA to Azlan, Lyszwaring via merum

MV 551C.

PV 43.5K

NetH: 11.5K

15/01/20

@ 09:17 am mandare registered authorise repair to ACC U's

12/3.41pm

Confirmed final by R5, 303.60 and 3 days with Carine. (Red 5818.40, 50%)

Date/Time, File Pass to?

☐

: Preli. Report

Days Of Repair:

3

1)

☒

: Final Report

Resurvey No. of Trip:

1

Date/Time, File Return to?

2)

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Insp (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

3 + RS. SI

Photos

Others

TOTAL

Report Format:

OD

Lump Sum / (P.A. @

5,303.60