ASSIGNMENT

Dale	Veh No: SLR6529R . VIRegn: 2017 Mugus!
From	Type: M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Estimated Cost.	Truck / Trailer or
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	
To Inspect Vehicle No:	ALL COMMENTS AND ADDRESS OF THE ALL PRINCIPLES AND ADDRESS OF THE ADDRESS OF
at Workshop m/s	2 214/
of	Op. (County
Insured:	Eng/No: ZVW400024989
Policy No.	_
Claims No.	Gen. Cond: 600 / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil STRim / STD A/Rim or
	Tyre Size: F: 215/60 R16_ R: 215/60 R16.
(Policy Condition)	
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO or Crucero,
Bal, or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 06 mm R/Bal. 06 mm
GIA / PR Seen: Consistent? : Yes or No	11/02/12
Est. Repairs: days Res.: Yes or No	
Lum Sum: % 3 Val.: Yes or No	'Survey held at MG Solution.
CA / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT	Front Ms.
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction 10 AXA	•
11. MV14.	
MV: 831C	
PV: 41.3K	
Nett, 41-71C.	
Date/Time, File Pass to? : Preli. Report	Days Of Repair:
· Final Report	Resurvey No. of Trip: Survey Fee:
1) Date/Time, File Return to?	Transportation
Add Fe	e: : Site Insp (\$)8+P88
-/-	: Interview (\$) Photos
Report Formst:	: Tech, Invs (3) Others
Lump Sum / LEJ: (3	:1//sellend 18