PAPER SURVEY	IGNMENT
From: Date:	Veh No: SKM 136(C 23/10/2018
Estimaled Cost:	Type: M.Car M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No:	Make: Toyota Sienta
at Workshop m/s	Colour ORNAGE All Insured / Std / NI / NA
of	Sp.ReadingT/F_ulio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	C/No: MHFZ 28H 340W 58468
Claims No.	Gen. Cond: Good / Far / Poor / Burnt
Sum Insured: Excess:	Steering: In order / Jammed / Leaked / Burnt or
(Client's Record)	Brake:   Order / Jammed / Leaked / Burnt or
Make of Veh;	Modi: Nil /S/Rim / STD A/Rim or
	Tyre Size: F:
(Policy Condition)	R:
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
Sal. or Market Value:	Front E-ar
DAC Accident Rport: Consistent? : Yes or No	R/Bal. mm P Bal.
GIA / PR Seen: Consistent?: Yes or No	L/Bal. mm L.Bal
Est. Repairs: days Res.: Yes or No	D.O.A. 73/40/18 COL
.um Sum: % 3 Val.: Yes or No	Survey held at
	Des. of Damages Frt   Rear   O/S   N/S   U/C   Rooftop or
CA / REV / REP. / 24 HRS  Vehicle: IN / OU	
ate: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to col
Date / Time Action / Instruction	The state of the s
submit \$2503.49,2days (red 0%)	
fair and reasonable	
e/Time, File Pass to? : Preli. Report	Davis Of Davis
The report	Days Of Repair: 2
6/5/2020 : Final Report	Resurvey No. of Trip: Survey Fee:
/Time, File Return to?	Transportation:
Add Fo	e: Site Insp (\$ S+85 Si
	and the same of th
	: Interview (\$