22/03/2003

ASS. REC. BY: | REF: CS3 | FWD20002792 | E9f3 | -1 ...ial Instruction:

Surveyor: Hock Wh

ASSIGNMENT (Office)

Nriman

From (Person): Venessa Chan. of FWD... Date/Time: 18/2/2020.

Estimated Cost: ______ Bill to: ______

OD / (TP) / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No: SLB 7652U Insured: SLC 6924L

at Workshop m/s EverDawn Auto Tel: 9817 4178

of 8 Kaki Bukit Ave 4 #01-02

Policy No: PN PV2019-00008319 Claim No: 1202000007933/CL

Sum Insured: ______ Excess: ______

Make of Veh: (Client's Record) ______ D.O.A. 8/2/2020.

CA / REV / REP. / REV 24 HRS 19/2/2020

H.O.D. Endorsement: ______

Date/Time: 18/2 Person Contacted: Mr Lee. Vehicle IN / (OUT)

Date/Time	Action/Instruction (X)
	SLB 7652U - NA/INC 20002210/h4 DOA: 8/2/2020
	SLC 6924L - X
	19/2/20 - survey taken.
	20/2/20 - re-survey taken.
	24/2/20 - after paint party workshop [illegible]

ASS. REC. BY: H ANN | REF: FWD

PRS

ASSIGNMENT

From: _____ Date: 19/2

Estimated Cost: _____

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

To Inspect Vehicle No: SLB 7652 U

at Workshop m/s Everdawn Auto.

of 8 Kaki Bukit Ave 4 #01-02.

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rport: _____ Consistent? : **Yes** or **No**

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

Est. Repairs: 4 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: SLB 7652U Yr Regn: 21/04/2016

Type: **M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer** or _____

Make: Mazda 3 c.c 1496

Colour red A/C: **Insured / Std / NI / NA**

Sp.Reading 57638 T/Radio: **Insured / Std / NI / NA**

Eng/No: _____

C/No: JM6BM44A603398[illegible]

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: _____

R: 215/50/R17

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or _____

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.	8/2/20	D.O.I.	19/2/20

Survey held at Everdawn Auto.

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

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

Date / Time	Action / Instruction
	repair Days → 4 Day
21/02/20	submit PRS.
	20/2/2020.
	MV - 50000
	PV - 38943
	NV - 14000

* PRS cash

RECEIVED 24 FEB 2020

Date/Time, File Pass to?
1) 24/2 [signature]
Date/Time, File Return to?
2) _____

☐ : Preli. Report
☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)
☐ : Interview ($ _____)
☐ : Tech. Invs ($ _____)
☐ : Weekend ($ _____)

Report Format : PRS.

Lump Sum / I.B.I: ($ _____)

Survey Fee:	80
Transportation:	50+50
___S + RS___SI	
Photos	
Others	
TOTAL	180