

ASS. NO. BY

C9/40120006646/Dsg 3

OE July 2021

ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 CR / TP / WS / TP RES / CR RES / EVA / INV / MV  
 To inspect Vehicle No: \_\_\_\_\_  
 at Workshop no: \_\_\_\_\_  
 of \_\_\_\_\_  
 Insured: \_\_\_\_\_  
 Policy No: \_\_\_\_\_  
 Claims No: \_\_\_\_\_  
 Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_  
 (Client's Record)  
 Make of Veh: \_\_\_\_\_

Veh No: QZ 74832 Yr Reg: 2006 Ang  
 Type: M/Car / M/Cycle / Bus / Van / Com / Taxi / Prime Mover /  
 Truck / Trailer or \_\_\_\_\_  
 Make: Toyota Dyna c.c. 2986  
 Colour: SILVER AC: Insured / Std / NI / NA  
 Sp. Reading: 487595 T/Radio: Insured / Std / NI / NA  
 Eng/No: 5L6657653  
 CHC: JTFUP34Y303012120  
 Gen. Cond: Good Fair / Poor / Burnt  
 Steering: Good Jammed / Leaked / Burnt or \_\_\_\_\_  
 Brake: Good Jammed / Leaked / Burnt or \_\_\_\_\_  
 Mod: NI S/Rim / STD A/Rim or \_\_\_\_\_  
 Tyre Size: F: 185 R14C  
 R: 155 R12C (double)  
 BS / DUN / EXNOVA / GY / FS / LZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or \_\_\_\_\_  
 Front: Michelin Rear: Falken  
 R/Bal. S mm R/Bal. S/S mm  
 L/Bal. S mm L/Bal. S/S mm  
 D.O.A. 22/06/2020 D.O.I. 25/06/2020  
 Survey held at: Goh Lee Hwa AMK  
 Des. of Damages: Frt / Rear / O/S / N/S / UIC / Rooftop or  
Front & Rear  
 The UIC / Chassis frame / Body Structure affected due to collision.

(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: 10 days Res.: Yes or No  
 Lum Sum: 20 % 3 Val: Yes or No  
 CA / REV / REP. / 24 HRS  
 Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

Date / Time	Action / Instruction
	UOI 9P6496H
	MV 151K Request for OI GVA repair.
	LTA 4.8K
	HL 10.2K 4prs well pan damaged. Invoice attached in GVA report.

15/07/20 Final R/S 8400/- with 10 days of rep.  
~~13,111~~ (\$13,111.60 Red 61%)  
 Days Of Repair: 10

Date/Time, File Pass to?  : Preli. Report  
 1) 15/07/20  : Final Report  
 Date/Time, File Return to? \_\_\_\_\_  
 2) \_\_\_\_\_  
 Report Format: \_\_\_\_\_  
 Lump Sum / I.B.I. (% 8,400/- R/S)  
 Add Fee:  : Site Insp (\$ \_\_\_\_\_)  
 : Interview (\$ \_\_\_\_\_)  
 : Tech. Invs (\$ \_\_\_\_\_)  
 : Weekend (\$ \_\_\_\_\_)  
 Survey Fee: 250+275  
 Transportation: 60  
 S+RS St 80+80  
 Photos 164  
 Others \_\_\_\_\_  
 TOTAL 909