

ASS. REC. BY: Taughlin

REF:

CTI
ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

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 Rpt: _____ Consistent? : Yes or No

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

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

OliviaVeh No: SND 7268HYr Regn: 2018, NovType: M.Car / M.Cycle / Bus / Van / Lorry / (Taxi) Prime Mover /

Truck / Trailer or

Make: Toyota Proc.c. 1798Colour: Blue

A/C: Insured / Std / NI / NA

Sp. Reading: 159/68

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: STDKBS3F4003077481Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: _____

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or Pavanti

Front

Rear

R/Bal. 6 mmR/Bal. 6 mmL/Bal. 6 mmL/Bal. 6 mm

D.O.A. _____

D.O.I. 21/7/20Survey held at Comfortdelgro Loyang

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

Rear 6/5

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

Date / Time	Action / Instruction
	<u>No body injury.</u>

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

\$ + RS. \$

Photos

Others

TOTAL

Report Format: _____

Lump Sum / B.B. (\$) _____

Add Fee:

☐

Site Insp (\$ _____)

☐

Interview (\$ _____)

☐

Tech. Invs (\$ _____)

☐

Weekend (\$ _____)

Plant Code of COMFORTDELGRO

Date/Time: 21.07.2020 10:18

Page : 1

Team: ARC Repair TP(CLSO)1

JOB CARD

Sales Order:

JC NO 305412122

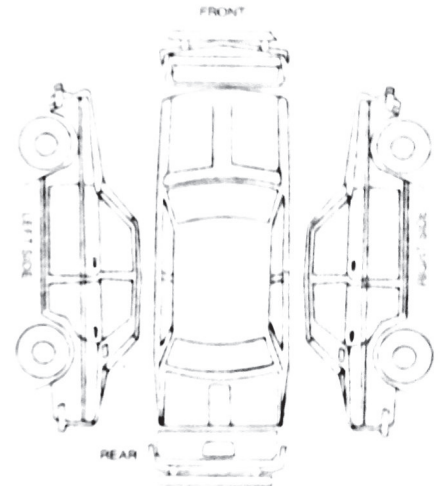
OWNER COMFORT TRANSPORTATION PTE LTD 7010045 383 SIN MING DRIVE Singapore SINGAPORE 575717 65508755	REGN NO SHD7268H	MILEAGE
MAKE TOYOTA	FUEL E 1/2 F	
MODEL PRIUS HYBRID(G4)21	DATE/TIME IN 21.07.2020 08:05	
YR OF MANU. 27.11.2018	TARGET DATE	
CHASSIS CODE JTDKB3FU003077481	COMPLETION DATE/TIME	

Accident Date: 21.07.2020

NATURE: 3P 21.07.2020

JOB DESCRIPTION

S/NO LABOR CODE DESCRIPTION



WORKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Checklist

Exit Pass

Vehicle No.: SHD7268H

OLIVIA

Vehicle No.:

SHD7268H

Signature Date

Signature Date

Name of Service Advisor

Date

turned to Service Reception upon collection

To be kept by Security Guard