

ASS. REC. BY: Rasul

REF:

CS/U0120007818/R19/3

250B

COEXPIRY: 2025/FEB

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SLA 3132Kat Workshop m/s CYCLE & CARRIAGEof 18K, PANDAN LUMPInsured: U01

Policy No. _____

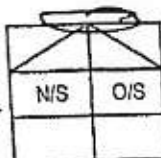
Claims No. M12D13642008Sum Insured: _____ Excess: 750

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

Bal. or Market Value: 80K

IDAC Accident Report: _____ Consistent? : Yes or No

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

Est. Repairs: 8 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:

SLA 3132KYr Regn: 2015 / FEBType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

MERCEDES BENZ C180 AV c.c. 1595

Colour:

GREY

A/C: Insured / Std / NI / NA

Sp. Reading

107436

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

WDD2050402R034410Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

225/50R17

R:

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

TOYO / YOKO or:

CONTINENTAL

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

29/07/2020

D.O.I.

29/07/2020

Survey held at

CYCLE & CARRIAGE (PL)

Des. of Damages

FR

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 limit 27K. Email to Vincent30/07/20 @ 10.10am revert to Josephine Wong by email.30/07/20 @ 2.41pm Josephine Wong informed C/A not more than \$27K & ex:\$750 by email.30/07/20 @ 2.46pm Informed Vincent C/A not more than \$27K on P/P basis & ex:\$750 by email.02/08/20 @ 5.06pm Rasul finalised with Vincent final fig \$26114.82, 8 days (after ex:\$750).Final fig \$26864.82 (Red \$10810.14, 29%)

Date/Time, File Pass to?



: Preli. Report

03/09 Typist



: Final Report

Date/Time, File Return to?

2)

Report Format:

OD

Lump Sum / L.S. / %

26864.82Days Of Repair: 8Resurvey No. of Trip: 1

Add Fee:



: Site Insp (\$



: Interview (\$



: Tech. Invs (\$



: Weekend (\$

Survey Fee:

27x25=675250+675

Transportation:

60

S + RS, SI

80

Photos

110

Others

580

TOTAL

1175