ASS. REC. BY: Steve REF: CS/AIG2090 7923/Eqf3

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. 1900003757

Claims No. 5910916989SG

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: 3 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: SFW 1922R Yr Regn: 15/02/2012

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or 1591

Make: Hyundai ~~Accent~~ ELANTRA c.c ~~1368~~

Colour Silver A/C: Insured / Std / NI / NA

Sp.Reading 71699 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KMHDH41CMC423262

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: 185/60R 15

R: 11

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

Front		Rear	
R/Bal.	5 mm	R/Bal.	5 mm
L/Bal.	5 mm	L/Bal.	5 mm
D.O.A.	24/4/20	D.O.I.	4/8/20

Survey held at _____

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

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

Date / Time	Action / Instruction
	pending estimate / GIA report
	11/08/20@6.23pm Steve finalised with Winson LS $1650, 3 days. (Red $3405.60, 67%)

Date/Time, File Pass to? 1) 12/08 Typist

Date/Time, File Return to? 2) _____

☐ : Preli. Report

☐ : Final Report

Days Of Repair: 3

Resurvey No. of Trip: 2

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

Report Format : MER-TP

Lump Sum / % : 1650

Survey Fee:	
Transportation:	
___S + RS.___SI	
Photos	
Others	
TOTAL	