

ASS. REC. BY: Sun Pin

REF: CS/CT120009009/Qsf3

**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	
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

Veh No: SMA 8353U Yr Regn: 21/06/2018  
Type: M.Caf / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
Truck / Trailer or \_\_\_\_\_  
Make: Hyundai Elantra 1.6 c.c. 1591  
Colour: White A/C: Insured / Std / NI / NA  
Sp.Reading: 44564 T/Radio: Insured / Std / NI / NA  
Eng/No: \_\_\_\_\_  
C/No: KMHD841CMJU705121  
Gen. Cond: Good / Fair / Poor / Burnt  
Steering: Inorder / Jammed / Leaked / Burnt or \_\_\_\_\_  
Brake: Inorder / Jammed / Leaked / Burnt or \_\_\_\_\_  
Mod: Nil / S/Rim / STD A/RIm or \_\_\_\_\_  
Tyre Size: F: 215/45 ZR17  
R: 215/45 ZR17  
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or Nexen  
Front Rear  
R/Bal. 6 mm R/Bal. 6 mm  
L/Bal. 6 mm L/Bal. 6 mm  
D.O.A. 24/08/2020 D.O.I. 26/08/2020  
Survey held at Vermogen  
Des. of Damages: Frt Rear / O/S / N/S / UIC / Rooftop or  
The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	MV: 60,000
	PV: 37,564
	IV: 22,436
	SUN PIN CONFIRMED L/S \$ 2,550.00/4 DAYS WITH MINOKO
	(\$ 14,151.29/RED - 85%)

Date/Time, File Pass to? 10/09/2020  
1) TYPIST  
Date/Time, File Return to?  
2) \_\_\_\_\_

: Preli. Report  
 : Final Report

Days Of Repair: 4  
Resurvey No. of Trip: 1

Add Fee:  : Site Insp (\$ \_\_\_\_\_)  
 : Interview (\$ \_\_\_\_\_)  
 : Tech. Invs (\$ \_\_\_\_\_)  
 : Weekend (\$ \_\_\_\_\_)

Survey Fee:	
Transportation:	
S+RS, SI	
Photos	
Others	
TOTAL	

Report Format : \_\_\_\_\_  
**Lump Sum** I.B.I: (\$ \$ 2,550.00 L/S )