

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 Rport: _____ 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: SM4983Z Yr Regn: 2020, July
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: Hyundai Accent c.c 1368
 Colour: Grey A/C: Insured / Std / NI / NA
 Sp. Reading: 2283 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: EMHEU41BTK4481321
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or _____
 Brake: In order / Jammed / Leaked / Burnt or _____
 Modi: Nil / S/Rim / STD A/Rim or _____
 Tyre Size: F: 175/70R14
 R: 175/70R14
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or Kumho
 Front _____ Rear _____
 R/Bal. 06 mm R/Bal. 06 mm
 L/Bal. 06 mm L/Bal. 06 mm
 D.O.A. _____ D.O.I. 10/09/20
 Survey held at CAS Garage
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or _____
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>TP 1st Cap.</u>
	<u>MV :</u>
	<u>PV :</u>
	<u>Nett :</u>

Date/Time. File Pass to? : Preli. Report
 : Final Report
 1) _____
 Date/Time. File Return to? _____
 2) _____
 Report Format: _____
 Long. 2000 / 1000 / 500

Days Of Repair: _____
 Resurvey No. of Trip: _____

Adm Fee: : Site Insp (\$ _____)
 : Interview (\$ _____)
 : Tech. Insp (\$ _____)
 : Misc. (\$ _____)

Survey Fee: _____
 Transportation: _____
 3 + PS. \$ _____
 Photos: _____
 Other: _____