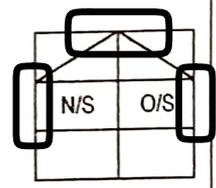


ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/s: **GOLDBELL ENGINEERING**
 of _____
 Insured: _____
 Policy No: _____
 Claims No: _____
 Sum Insured: _____ Excess: **\$500**
 (Client's Record)
 Make of Veh: _____

Veh No: **SBB 9955B** Yr Regn: **30 Jan/2013**
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: **TOYOTA LEXUS GS250** c.c. **2500**
 Colour: **White** A/C: **Insured / Std / NI / NA**
 Sp. Reading: **112516** T/Radio: **Insured / Std / NI / NA**
 Eng/No: _____
 C/No: **JTHBF1BL905005977 ***
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Harder / Jammed / Leaked / Burnt or _____
 Brake: Harder / Jammed / Leaked / Burnt or _____
 Modi: **Nil / S/Rim** / STD A/Rim or _____

(Policy Condition)
 Remark: **The veh had commenced its repair at the time of inspection.**
 Bal. or Market Value: **\$61K**
 IDAC Accident Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: **8** days Res.: Yes or No
 Lum Sum: **20** % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____
 Vehicle: IN / OUT



Tyre Size: F: **275/30ZR19**
 R: **275/30ZR19**
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or **Continental**

Front		Rear	
R/Bal. 5 mm		R/Bal. 5 mm	
L/Bal. 5 mm		L/Bal. 5 mm	
D.O.A. _____		D.O.I. 06-10-2020	

 Survey held at **W/S** **3:30pm**
 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
	COE Rebate: \$52816
	NET: \$8184
	MV - \$61,000.00
	LTA - \$52,816.00
	NETT = \$8,184.00
	SUBMIT TOTAL LOSS AS NOT ECONOMICAL FOR REPAIR

Date/Time, File Pass to? : Preli. Report
05/11/2020 : Final Report
 1) **TYPIST**
 Date/Time, File Return to? _____

Days Of Repair: **8**
 Resurvey No. of Trip: **-**

Add Fee: : Site Insp (\$ _____)
 : Interview (\$ _____)
 : Tech. Insp (\$ _____)
 : W/weekend (\$ _____)

Survey Fee:	
Transportation:	
3 + RS. SI	
Photos	
Other:	
TOTAL	

Report Subject: **TOTAL LOSS**
 Long Code/MPB: _____