CS/FCI20011646/Asf3

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

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SFB325G. Yr Regn: 2017, May.

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

Make: Renault Fluence c.c 1461

Colour: White. A/C: Insured / Std / NI / NA

Sp.Reading: 135615 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: VF1LZLF0E54491634

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: 205/60R16

R: 205/60R16

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

Front		Rear	
R/Bal.	06 mm	R/Bal.	06 mm
L/Bal.	06 mm	L/Bal.	06 mm
D.O.A.		D.O.I.	27/10/20

Survey held at: Tick Mai

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
	TP 1st Cap.
	MV : 50K (Depreciation @ 6.5K x 6.5 years + Min Perf = 42.2 + 8.5 = 50K.
	PV : 39K.
	Nett : 11K.
	ADRIAN CONFIRMED L/S $ 7,700.00/7 DAYS WITH BOSS.
	($ 4,280.06/RED - 36%)

Date/Time. File Pass to? 25/11/2020 TYPIST

Date/Time. File Return to?

Report Format: Prelim / Final L/S $ 7,700.00

☐ : Preli. Report

☑ : Final Report

Days Of Repair: 7

Resurvey No. of Trip: 2

Add Fee: ☐ : Site Insp ($) ☐ : Interview ($) ☐ : Tech. Insp ($) ☐ : Meal and

Survey Fee:

Transportation: S + PS S

Photos

Other:

Total