ASS. REC. BY: Kenneth

REF: TU / 20011354/KS

CS3/III20011354/Ksd3

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

QD / TPFWS / TP RES / QD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s Excel

of 287

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

2.30pm

(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: 04 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: SLR 5195B Yr Regn: 08.17

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

Make: Honda ~~Vezel~~ (CA) HRV 1498

Colour M.D. Blue A/C: Insured / Std / NI / NA

Sp.Reading 64272 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JHMRU 1830GX 202405

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modl : Nil / S/Rim / STD A/Rim or _____

Tyre Size: F: 215/60R16

R: _____

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

Front		Rear	
R/Bal.	4 mm	R/Bal.	4 mm
L/Bal.	4 mm	L/Bal.	4 mm
D.O.A.	17/10/20	D.O.I.	20/10/2020

Survey held at ✓ 2.15pm

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

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

Date / Time	Action / Instruction
/	PRS
	1.5 – 2.5k
	After Repair: 22.10.2020 @ 10.15am

Date/Time, File Pass to?
21/10/2020
1) TYPIST
Date/Time, File Return to?
2) _____

☐ : Prell. Report
☑ : Final Report

Days Of Repair: -

Resurvey No. of Trip: -

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

Survey Fee
Transportation: _____ $ + RS. _____ SI
Parking
Others
TOTAL

Report Format : PRS

Lump Sum / I.B.I: (S _____)