ASS. REC. BY: Sun Pin | REF: Lonpqc CS3/LPC20011600/Qsd3

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
X	X

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: SLB 3133C Yr Regn: 24/03/2016

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

Make: Subary Forester 2.0 c.c 1998

Colour Black A/C: Insured / Std / NI / NA

Sp.Reading 106897 T/Radio: Insured / Std / NI / NA

Eng/No: -

C/No: JF1SJGK85GG067453

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: 235/55 R18

R: 235/55 R18.

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.	24/10/2020	D.O.I.	26/10/2020.

Survey held at Dynamic Mechanics

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
	MV: 63,000
	PV: 40,056
	NV: 22,944
	28/10/2020 @ 17:18PM CHECKED WITH ERIC VIA PHONE CALL, NO ESTIMATE

Date/Time, File Pass to?
02/11/2020
1) TYPIST
Date/Time, File Return to?
2) _____

☐ : Preli. Report
☑ : Final Report

Days Of Repair: -

Resurvey No. of Trip: 1

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

Report Format : PRS

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

Survey Fee:	
Transportation:	
___S + RS.___SI	
Photos	
Others	
TOTAL	