

ASS. REC. BY: Sun Pin

REF:

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. _____

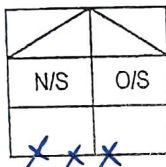
Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

Bal. or Market Value: _____

IDAC Accident Rpt: _____ 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: 24/03/2016Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: Subaru Forester 2.0 c.c. 1998Colour: Black A/C: Insured / Std / NI / NASp. Reading: 106897 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JFLSJ9K85G67067453Gen. Cond: Good (Fair) / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 235/55 R18R: 235/55 R18BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU (PIR) SUMI /

TOYO / YOKO or _____

Front

R/Bal. 6 mmL/Bal. 6 mmD.O.A. 24/10/2020

Survey held at

Dynamic MechanicsDes. 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)

Rep. Format: PRS

Lump Sum / L.B.H. ()

Days Of Repair: _____

Resurvey No. of Trip: 1

Add Fee:

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

Survey Fee:

Transportation:

S + RS. \$ _____

Photos

Others

TOTAL