ASS. REC. BY: Steve | REF: A16

ASSIGNMENT

From: Date:

Estimated Cost:

QD / TP / WS / TP RES / QD 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

Com Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SHD 4236U Yr Regn: 25/10/19

Type: M.Car / M.Cycle / Bus / Van / Lorry / Tax / Prime Mover /

Truck / Trailer or

Make: Hyundai Jong c.c 1580

Colour Blue A/C: Insured / Std / NI / N

Sp.Reading 189988 T/Radio: Insured / Std / NI / N

Eng/No:

C/No: KMHC851CVLU187347

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: 195/65R15

R:

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

Front		Rear	
R/Bal.	5 mm	R/Bal.	5 mm
L/Bal.	5 mm	L/Bal.	5 mm
D.O.A.	11/11/20	D.O.I.	11/11/20

Survey held at Comfort delgro

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

The U/C / Chassis frame / Body Structure affected due to collisio

Date / Time	Action / Instruction

Date/Time, File Pass to?

( )

Date/Time, File Return to?

☐ : Prell. Report

☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Invs ($)

☐ : Weekend ($)

Survey Fee:

Transportation:

__$ • RS__SI

Photos

Others

TOTAL

Repair Forms :

Temp Sum / L.E.I: ( )

...ENGINEERING
member of COMFORTDELGRO

ComfortDelGro Engineering Pte Ltd

Service Centres

65531111
SPARK Assist
Recovery · Towing · Accident

Appointed Partners

JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

Job Requisition

1. Date: 11-11-2020 Time Received: 8.00

2. [ ] New [ ] SPARK Kakis

Name of Customer : NG Sun JIE

Contact No. : 87544326

Vehicle No. : SHD 4236U

Make / Model / Colour : Ionic / Blue

Email :

3. Vehicle Type:
- [ ] Private
- [x] Taxi (CTPL/CCPL)
- [ ] Fleet
- [ ] STK (Boon Lay)

4. Type of Towing:
- [ ] Normal Tow
- [ ] King Dolly
- [x] Flat Bed
- [ ] Crane-up

5. Nature of Service:
- [ ] Jumpstart
- [ ] Recovery
- [ ] Change Tyre / Battery

6. Parts Replaced/Remarks:

7. Location: Lentor ave

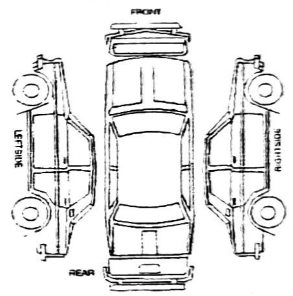
8. Vehicle Tow - In Workshop:
- [ ] Smoky Exhaust
- [ ] Overheating
- [ ] Brake Faulty
- [ ] Starting Problem
- [ ] Accident
- [ ] Return Taxi
- [ ] Wheel Jammed
- [ ] Steering Faulty
- [ ] Alternator Faulty
- [ ] Loss Power
- [ ] Engine Stalled

9. Preferred Workshop:
- [ ] Braddell
- [ ] Sin Ming
- [ ] Senoko
- [ ] Others: ______
- [x] Loyang
- [ ] Sungei Kadut
- [ ] Komoco (UBI / Leng Kee)
- [ ] Pandan
- [ ] Ubi
- [ ] Cycle & Carriage (PD)

10. Odometer Reading :

Fuel Level : F | 1/4 | 1/2 | 3/4 | E

11. Radio / CD Player
- [ ] OK
- [ ] Faulty
- [ ] Not tested



#: Cracked X: Dented
/: Scatched O: Missing

Signature of Customer

Job Attended

12. Tow Truck / Recovery Van : [ ] VRS [ ] QA [x] GAO [ ] TZ [ ] YISHUN TOWING [ ] OTHERS

Name of Driver : K.Moorthy

Vehicle No. : K.Moorthy

Time Dispatch : 8.00

Time of Arrival : 9.00AM

Time Completed : 10.AM

Cash Invoice Details (if applicable)

13. Cash Invoice No. :

Customer Acknowledgement

a. I have been advised to remove all valuable items in my vehicle, including Global Positioning System (GPS), audio compact disk, thumbdrive, carpark coupons, cash cards, spectacles, pen, etc.

b. I understand that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses.

c. Surcharge: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.

11.11.2020 — Date
10.AM — Time
Signature of Customer

14. WORKSHOP

Name of Attending Staff/Guard
Date & Time of Arrival
Signature of Attending Staff/Guard

CUSTOMER'S C...