ASS, REC. BY: ASSIGNMENT From: Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover / Estimated Cost: OD/TP/WS/TP RES/ OD RES/ EVA/INV/ MV Truck / Traller or K19 Make: Insured / Std / NI / N at Workshop m/s T/Radio: Insured / Std / NI / N Sp.Reading Eng/No: C/No: Gen. Cond: Good / Fair / Poor / Burnt Claims No. Sleering: Inorder / Jammed / Leaked / Burnt or \$300.00 Sum Insured: Excess: Brake: Inorder / Jammed / Leaked / Burnt or (Client's Record) Modl: NII / 8/Rim / STD A/Rim or Make of Veh: Tyre Size: (Policy Condition) BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / Remark: The veh had commenced its repair at the time of inspection. TOYO / YOKO or Rear Front Bal. or Market Value: R/Bal. Consistent?: Yes or No DAC Accident Roort: UBal. Consistent?: Yes or No SIA / PR Seen: 0.0.1. Res.: Yes or No Est. Repairs: 3 Val.: Yes or No Survey held at Lum Sum: I Rear I O/S I N/S / U/C I Rooftop or Des. of Damages CA I REV I REP. I 24 HRS Vehicle: IN / OUT Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision Date / Time Action / Instruction P/P \$7,198.40/6 DAYS, FINALIZED WITH ALTING \$5,592.60 RED - 44%) ate/Time, File Pass to? . Days Of Repair: 6 : Prell. Report 16/12/2020 Resurvey No. of Trip: Survey Fee: : Final Report TYPIST Transportation: Úale/Time, File Return to? : Site Insp (\$ Add Fee: S + RS SI : Interview (\$ Pholos Tech. Inva (% Population : West and 15 Lump Sum [LEJ: ]: P/P \$7,198.40

TOTAL