ASS. REC. BY: Sun Pin

REF: CS/AIG20008471/Qvf3

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
XXXX	

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: SFV 5688X Yr Regn: 20/04/2012

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

Make: Suzuki Swift sport M c.c 1,586

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

Sp.Reading 26972 T/Radio: Insured / Std / NI / NA

Eng/No: -

C/No: JSAFZC32S00100727

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: 215/40 R17

R: 215/40 R17

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / 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.	13/08/2020	D.O.I.	17/08/2020

Survey held at A-Tec

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
	Repair day 7 days
	MV: 29,000
	PV: 18870
	NV: 10,000

Date/Time, File Pass to? [ ] : Preli. Report

1) _____ [ ] : Final Report

Date/Time, File Return to?

2) ~~20/8/20-Typist~~ 9/12/20-Typist

Report Format : DAR TP

Lump Sum / ~~I.B.I.~~ ($ $5150)

Days Of Repair: ~~7~~ 8

Resurvey No. of Trip: _____

Add Fee: [ ] : Site Insp ($ _____)

[ ] : Interview ($ _____)

[ ] : Tech. Invs ($ _____)

[ ] : Weekend ($ _____)

Survey Fee:	
Transportation:	
__S+RS, __SI	
Photos	
Others	
TOTAL	