ASS. REC. BY: TaufUL REF: INC	
ASSIGNMENT	
From: Date:	Veh No: 54C2332T Yr Regn: 2018, Dec.
Estimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
OD / P WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
To Inspect Vehicle No:	Make: Hymolor berily, c.c 1580
at Workshop m/s	Colour A/C: Insured / Std / NI / NA
of	Sp.Reading 284448 T/Radio: Insured / Std / NI / NA
Insured:	Eng/No:
Policy No.	C/No: VMH(851 CVK41 ?7309
Claims No.	Gen. Cond: Good) Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder/ Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim or
	Tyre Size: F: 195 65 Kg 5
(Policy Condition)	R:
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYOTYOKO or West lake.
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. mm R/Bal. mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. L/Bal. mm
Est. Repairs: days Res.: Yes or No	D.O.A. D.O.I. 24/12/20
Lum Sum: % 3 Val.: Yes or No	Survey held at Confut loggy
CA / REV / REP. / 24 HRS Vehicle: IN / OUT	Des. of Damages (Frt) Rear I O/S / N/S / U/C Rooftop or
Date: Person Contacted: Lim TS	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
COR I/s \$1350 , 2 days.	
RED: 775.34	
Dale/Time, File Pass to? : Preli. Report	Days Of Repair: 2
; Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	. Transportation:
2) Add Fe	ee:: Site Insp (\$)s+Rssi
	: Interview (\$ ) Photos
Repetitionnel:	: Tech. Invs (\$) others
Lump Sum [1.8.1: 7]	:Weelfend (\$)
	TOTAL