

Surveys

REF:

CC4/AIG20014687/Dga³

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:

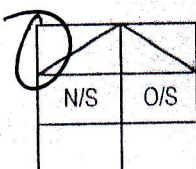
Excess:

(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:

4

days

Res.: Yes or No

Lum Sum:

20

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SMG 542L

Yr Regn:

Nov 2018

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

Truck / Trailer or

Make:

Andi A5 SB

C.C

1984

Colour

Red

A/C:

Insured / Std / NI / NA

Sp. Reading

45409

T/Radio:

Insured / Std / NI / NA

Eng/No:

26 CVK064668

C/No:

WAUZZZF58JA112896

Gen. Cond:

☒ Good / Fair / Poor / Burnt

Steering:

☒ In order / Jammed / Leaked / Burnt or

Brake:

☒ In order / Jammed / Leaked / Burnt or

Modi:

Nil / ☒ STD A/Rim or

Tyre Size:

F:

255 / 35 Z19

R:

— 11 —

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Michelin.

Front

Rear

R/Bal.

S

mm

R/Bal.

S

mm

L/Bal.

S

mm

L/Bal.

S

mm

D.O.A.

24/12/2020

D.O.I.

30/12/2020

Survey held at

JWG AMK

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

W/S Rant

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

AIG SGD 666A

Part prices checked with Andi past cases surveyed by Adrian

04/02/2021 JWG 215 7500/- with 4 days of rep

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

\$ + RS. SI

Photos

Others

TOTAL

Report Format :

Lump Sum / I.B.I: (\$

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Insp (\$

☐

: Weekend (\$