

ASS. REC. BY: P. HallREF: C93/CT1 20010280/Rid3

2837

EXPIRY: 2030/04/04

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: SKE 88352at Workshop m/s Kok namhof 1, Suon Lee St #06-04Insured: CTI

Policy No. _____

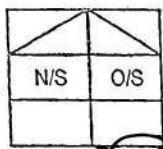
Claims No. _____

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: 66k

IDAC Accident Rpt: _____ Consistent? : Yes or No

G/A / 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

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SKE 88352 Yr Regn: 2010 / AugType: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: TOYOTA ESTIMA ACES 2.4A c.c. 2362Colour: WHITE A/C: Insured / Std / NI / NASp. Reading: 145716 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: ACR50 7090557Gen. Cond: Good / FAIR / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 225/452R8

R: _____

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

TOYO / YOKO or FALKEN

Front _____ Rear _____

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 21/09/2020 D.O.I. 28/09/2020Survey held at Kok namh

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

Rear O/S

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

Date / Time Action / Instruction

Date/Time, File Pass to?

☐ : Prel. Report

Days Of Repair: _____

1)

☐ : Final Report

Resurvey No. of Trip: _____

Date/Time, File Return to?

2)

Add Fee: ☐ : Site Insp (\$ _____)

Survey Fee: _____

Transportation: _____

S + RS. SI

Photos

Others

TOTAL

Report Form: _____

Lump Sum / L.S.I. (%) _____