bcl. SMO

ASSIGNMENT

Date

timated Cost

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

Inspect Vehicle No:

Workshop m/s Freeston Auto

sured:

licy No:

aims No:

um Insured: Excess:

(Client's Record)

ake of Veh:

(Policy Condition)

emark: The veh had commenced its repair at the time of inspection.

N/S	O/S

al. or Market Value:

DAC Accident Rport: Consistent? : Yes or No

SIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 4 days Res.: Yes or No

um Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted

Veh No: SCX1982R Reg: 20 Mar 2018

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

Make: Toyota Alphard 2.5 c.c. 2494

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

Sp Reading: 172539 T/Radio: Insured / Std / NI / NA

Eng No:

C/No: JTNGF3DH708008818

Gen. Cond.: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 235/50 R18

R: //

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.: D.O.I.: 06-01-21

Survey held at: W/S 4pm

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

Date/Time File Pass to:

: Preli. Report

: Final Report

Date/Time File Return to:

Days Of Repair:

Resurvey No. of Trip:

Add Fee: : Site Insp. ($

: Interview ($

Survey Fee:

Transportation

Photos

Other