

Kenneth

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s Lim Yew Bee

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

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: 02 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: GBH 8344 Yr Regn: 10, 18

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

Truck / Trailer or

Make: Toy 1-litre c.c. 2882Colour: Silver AC: Insured / Std / NI / NASp. Reading: 43338 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: JT1-H 702P 500245503

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: Nil / S/Rlm / STD A/Rlm orTyre Size: F: 195R15X8

R: \_\_\_\_\_

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

TOYO / YOKO or

Front

Rear

R/Bal. 9 mmR/Bal. 7 mmL/Bal. 9 mmL/Bal. 7 mmD.O.A. 5/1/21D.O.I. 25/1/2021

Survey held at

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

R/O/S

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

Date / Time Action / Instruction

1 Est not ready

finalise lump sum \$1100, 2days

red: 1696.6;40%

Date/Time, File Pass to?

☐ : Prel. ReportDays Of Repair: 2

1)

☐ : Final Report

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee:

Date/Time, File Return to?

Transportation:

2)

Add Fee: ☐ : Site Insp (\$ \_\_\_\_\_)

\$ - RS. \$ \_\_\_\_\_

☐ : Interview (\$ \_\_\_\_\_)

Fees

☐ : Tech Invs (\$ \_\_\_\_\_)

Others

☐ : Weekend (\$ \_\_\_\_\_)

TOTAL

Report Format :

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