SS. REC. BY: Sun Pin NTUC.	SSIGNMENT
<u> </u>	
rom: Date:	Veh No: SHF 23JT. Yr Regn: 14/12/2017
stimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
D/TP/WS/TP RES/OD RES/EVA/INV/MV	Truck / Trailer or
o Inspect Vehicle No:	Make: Toyoty Priv 4. c.c 1795
1 Workshop m/s	Colour Maroun A/C: Insured / Std / NI / NA
f	Sp.Reading 314 665 T/Radio: Insured / Std / NI / NA
nsured:	Eng/No:
Policy No.	C/No: <u>TTPKB3F4003576</u> 96 2
Claims No.	Gen. Cond: Good (Fair) / Poor / Burnt
Sum Insured: Excess:	Steering: In order / 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 R15
(Policy Condition)	R: 195/65 RIS
Remark: The veh had commenced its N/S 0	D/S BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO or Sailan
Bal. or Market Value:	Front Rear
IDAC Accident Rport: Consistent? : Yes or No	R/Bal, 6 mm , R/Bal. 6 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 6 mm L/Bal. 6 mm
Est. Repairs: days Res.: Yes or No	D.O.A. 19/01/2021 D.O.I. 20/01/2021
Lum Sum: % 3 Val.: Yes or No	Survey held at
CA / REV / REP. / 24 HRS	Des. of Damages : Frt (Rear) / O/S / N/S / U/C / Rooftop or
Vehicle: IN /	
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision
Date / Time   Action / Instruction	70
	TAX/01/21/2038
Finalize amount \$450. Repair da	(11 037MT
	· ·
11.12.13.13, 30 /0	
	<u> </u>
Date/Time, File Pass to? : Preli. Report	Days Of Repair: 2
1) ; Final Report	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
	Id Fee: : Site Insp (\$ )_s+Rssi
-1	: Interview (\$ ) Photos
Republicant :	: Tech. Invs (\$ ) Others