

(08/11/13) Wef

ASS. REG. BY: Marcus

REF:

ccc/A1G21001027/ups3**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.

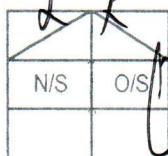
Sum Insured:

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:

GIA / PR Seen:

Est. Repairs:

8

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

no BI Repet.
Dep. 7:50

Veh No:

SMC1066J

Yr Regn:

26/6/18

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

Truck / Trailer or

(A)

Make:

Honda Fit

C.C

1317

Colour

white

A/C:

Insured / Std / NI / NA

Sp. Reading

30577

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

GK3 1316456

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

185/65R14

R:

YOKO

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

TOYO / YOKO or

CST tires.

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

20/1/21

D.O.I.

22/1/21

Survey held at

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

015 Body & sub.The Chassis frame / Body Structure affected due to collision.

Submit P/P \$5,118.32 (Red \$10,372.58 // 67%) - Excluded check items \$3,187.12

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:

Add Fee:



: Site Insp (\$

) ___S + RS___SI



: Interview (\$

) Photos



: Tech. Invs (\$

) Others



: Weekend (\$

)

Report Format :

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

TOTAL