

ASS. REC. BY: Taylor

REF: CR/ER/2100/288/JHJS.

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. _____

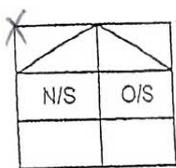
Sum Insured: _____ Excess: _____

(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: _____ Consistent? : Yes or No

GIA / 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: Guany Vehicle: IN / OUT

Veh No: SBS6572C Yr Regn: 2015, July

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

Truck / Trailer or _____

Make: Mercedes Benz Citaro C.C. 6374

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

Sp. Reading: 40330 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WEB62808523128617

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: 275/70R22.5

R: 275/70R22.5 (D)

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

TOYO / YOKO or _____

Front R/Bal. 8 mm / Rear R/Bal. 8/8 mm

L/Bal. 8 mm / L/Bal. 8/8 mm

D.O.A. _____ D.O.I. 27/1/21 4pm

Survey held at Yip's Chun Keng Depot

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

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

| Date / Time | Action / Instruction |
|-------------|--|
| | <u>w/s will provide cost of repair</u> |
| | submit 979, 1day |
| | red:192:19% |

Date/Time, File Pass to? : Preli. Report
 : Final Report

1) _____
Date/Time, File Return to?
2) _____

Report Format: _____
Lump Sum / I.B.C. ()

Days Of Repair: 1
Resurvey No. of Trip: _____

Add Fee: : Site Insp (\$ _____)
 : Interview (\$ _____)
 : Tech. Invs (\$ _____)
 : Weekend (\$ _____)

| | |
|-----------------|-------|
| Survey Fee: | _____ |
| Transportation: | _____ |
| S + RS | SI |
| Photos | _____ |
| Others | _____ |
| TOTAL | _____ |