

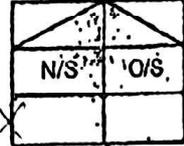
ASS. REC. BY: Steve REF: ATG

**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: \$600.00  
 (Client's Record)  
 Make of Veh: \_\_\_\_\_

Veh No: SMT 5913B Yr Ragn: 13/3/19  
 Type:  M.Car /  M.Cycle /  Bus /  Van /  Lorry /  Taxi /  Prime Mover /  
 Truck / Trailer or \_\_\_\_\_  
 Make: Mitsubishi Outlander cc 1998  
 Colour: Red A/C:  Insured /  Std /  NI /  N  
 Sp. Reading: 11358 T/Radio:  Insured /  Std /  NI /  N  
 Eng/No: \_\_\_\_\_  
 C/No: GF 7 W 497067  
 Gen. Cond:  Good /  Fair /  Poor /  Burnt  
 Steering:  In order /  Jammed /  Locked /  Burnt or  
 Brake:  In order /  Jammed /  Leaked /  Burnt or  
 Modl:  Nil /  S/Rim /  STD A/Rim or  
 Tyre Size: F: 225/55R18  
 R: \_\_\_\_\_

(Policy Condition)  
 Remark: The veh had commenced its repair at the time of inspection.



BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
 TOYO / YOKO or Toyo  

Front	Rear
R/Bal. <u>4</u> mm	R/Bal. <u>4</u> mm
L/Bal. <u>4</u> mm	L/Bal. <u>4</u> mm
D.O.A. <u>1/2/21</u>	D.O.I. <u>1/2/21</u>

 Survey held at Cycle & Carriage

Bal. or Market Value: \_\_\_\_\_  
 IDAC Accident Report: \_\_\_\_\_ Consistent? : Yes or No  
 SIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No  
 Est. Repairs: \_\_\_\_\_ days Res.: Yes or No  
 Cum Sum: \_\_\_\_\_ % 3 Val.: Yes or No  
 CA / REV / REP. / 24 HRS  
 Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_  
 Vehicle: IN / OUT

Des. of Damages:  Frt /  Rear /  O/S /  N/S /  UIC /  Rooftop or  
Rear LH  
 The UIC / Chassis frame / Body Structure affected due to collision

Date / Time	Action / Instruction
	<u>MV-99K</u>
	<u>Finalise at \$1470.86 before excess and GST, 4 days</u>
	<u>RED: 1200.59; 44%</u>

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

Days Of Repair: 4  
 Resurvey No. of Trip: \_\_\_\_\_

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

Survey Fee:	_____
Transportation:	_____
S + RS:	_____
Phone:	_____
Others:	_____
TOTAL	_____

Work performed: \_\_\_\_\_  
 Date/Time, File Return to? \_\_\_\_\_