

ASS. REC. BY: Tan JHREF: CS/ASM 21002891/719.83

## 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. \_\_\_\_\_

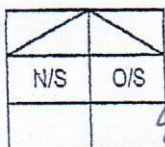
Claims No. S1M034DK

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: 460K

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

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

Est. Repairs: 2 days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS WP PRSDate: \_\_\_\_\_ Person Contacted: Candy Vehicle: IN / OUTVeh No: 89466110 Yr Regn: 2016, Feb.Type: ☒ M.Car / ☐ M.Cycle / ☐ Bus / ☐ Van / ☐ Lorry / ☐ Taxi / ☐ Prime Mover /

Truck / Trailer or \_\_\_\_\_

Make: Nissan Teana c.c. 1997Colour white A/C: ☒ Insured / ☐ Std / ☐ NI / ☐ NASp. Reading 54168 T/Radio: ☒ Insured / ☐ Std / ☐ NI / ☐ NA

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

C/No: MNT KBAL 3320024958Gen. Cond: ☒ Good / ☐ Fair / ☐ Poor / ☐ BurntSteering: ☒ Inorder / ☐ Jammed / ☐ Leaked / ☐ Burnt orBrake: ☒ Inorder / ☐ Jammed / ☐ Leaked / ☐ Burnt orModi: ☒ Nil / ☐ S/Rim / ☐ STD A/Rim orTyre Size: F: 215/55R17R: 2 -BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or \_\_\_\_\_

Front \_\_\_\_\_ Rear \_\_\_\_\_

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. \_\_\_\_\_ D.O.I. 8/3/21 2150pmSurvey held at Triple TDes. of Damages: ☐ Frt / ☐ Rear / ☐ O/S / ☐ N/S / ☐ U/C / ☐ Rooftop orW/S Rear

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

Date / Time Action / Instruction 82821100Inform w/s to pass GIA. Repair Range: \$500 - \$1000, 2 days.

after paint: 11/03/21

13/04/21 @ 9.39am revised to Richard Ang via Smart Claims.

13/04/21 Submit PRS.

Date/Time, File Pass to?

☐ : Preli. Report

1) 13/04 Typist

☐ : Final Report

Date/Time, File Return to?

2) \_\_\_\_\_

Days Of Repair: 2Resurvey No. of Trip: 1

Survey Fee:

Transportation:

S + RS SI

Photos

Others

TOTAL

Add Fee: ☐ : Site Insp (\$ \_\_\_\_\_)☐ : Interview (\$ \_\_\_\_\_)☐ : Tech. Invs (\$ \_\_\_\_\_)☐ : Weekend (\$ \_\_\_\_\_)Report Format: SMART CLAIMS - PRS

Lump Sum / L.S. (\$) \_\_\_\_\_