CS/AGI21003215/Gqd3

ASSIGNED BY: [handwritten initials] AGI

ASSIGNMENT

From: Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV (TP circled)

To Inspect Vehicle No:

at Workshop m/s First Motor

of

Insured:

Policy No.

Claims No. C10009283/KY

Sum Insured: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value:

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

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

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: JTF6797 ir Regn: —

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or (M.Cycle circled)

Make: Modenas Elegan 250i 249.1

Colour: Black A/C: Insured / Std / Nil / N.A

Sp.Reading: 32887 T/Radio: Insured / Std / Nil / N.A

Eng/No:

C/No: —

Gen. Cond: Good / Fair / Poor / Burnt (Good circled)

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or (Nil circled)

Tyre Size: F: 120/70-14

R: 130/70-13

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

Front			Rear		
R/Bal.	4	mm	R/Bal.	4	mm
L/Bal.		mm	L/Bal.		mm
D.O.A.			D.O.I.	11-03-21 5pm	

Survey held at w/s

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or (Rear, O/S circled)

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

Date / Time	Action / Instruction
	Estimate not Ready
	New Bike RM15315
	Guo Qiang finalised LS $1000, 2 days. (Red $1493, 60%)

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

1) 28/06 Typist ☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 2

Resurvey No. of Trip: 1

Add Fee: ☐ Site Insp ($ ☐ Interview ($ ☐ Tech. Insp ($ ☐ Travel Exp

Survey Fee:

Transportation:

Photos

Repair Period TP

Lump Sum 1000