

ASS. REC. BY: James

REF: CS4/FCI21004180/RIVF3

ASSIGNMENT

COPY: 2024

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: YN 5689K

at Workshop m/s KAWO

of 18, GUN CRESLONI

Insured: FCI

Policy No. _____

Claims No. D21001017MFVS

Sum Insured: _____ Excess: FBA

(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: 103K

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

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: YN 5689K

Yr Regn: 2014, July

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

Truck / Trailer or ROAD SWEEPER

Make: DULEVO SOO VEHICLE BUS c.c. 5883

Colour WHITE

A/C: Insured / Std / NI / NA

Sp. Reading _____

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: ZA9S502065AC 38183

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: NI / S/Rim / STD A/Rim or

Tyre Size: F: 235/60R22-5

R: 235/60R22-5

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

TOYO / YOKO or FIRENZA

Front

Rear

R/Bal. 7 mm

R/Bal. 7/7 mm

L/Bal. 7 mm

L/Bal. 7/7 mm

D.O.A. 23/03/24

D.O.I. 27/04/24

Survey held at KLENCO

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

ENGINE COMPARTMENT

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

Date / Time	Action / Instruction
	<u>Repair limit - 89K</u>
27/5/21	Submit CTL-MV:\$103,000 (est) LTA: \$14,044 NV:\$88,956

Date/Time, File Pass to?

☐ : Prel. Report
☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Date/Time, File Return to?

2) 27/5/21-Typist

Rep. Format: _____

Lump Sum / L.B. / %

Add Fee: ☐ : Site Insp (\$

☐ : Interview (\$

☐ : Tech. Invs (\$

☐ : Weekend (\$

Survey Fee:

Transportation:

Investigation

\$ + RS. SI

Photos

Others

+ 500

TOTAL

827 716/4

77 x 19 = 1155

170 + 1155

50

500

55

1430