ASS. REG. BY: REF: AIG / 21004337/Kp

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s **S & H**

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.

	N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rport: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: **04** days   Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Veh No: **CBK 5718D**   Yr Regn: **09, 20**

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

Make: **Kia K2500** (A) c.c **2497**

Colour **Blue**   A/C: Insured / Std / NI / NA

Sp.Reading **12827**   T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: **KNCSJX762274354888**

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

Steering: In(order) / Jammed / Leaked / Burnt or _____

Brake: In(order) / Jammed / Leaked / Burnt or _____

Modl : (Nil) / S/Rim / STD A/Rim or _____

Tyre Size: F: **195R 15X8**
R: **155R 12X8 (O)**

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

Front		Rear	
R/Bal. **9** mm		R/Bal. **9 8** mm	
L/Bal. **9** mm		L/Bal. **9 9** mm	

D.O.A. **1/4/21**   D.O.I. **3/5/2021**

Survey held at _____

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

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

Date / Time	Action / Instruction

Date/Time, File Pass to?
1) _____
☐ : Prell. Report
☐ : Final Report

Date/Time, File Return to?
2) _____

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

Days Of Repair: _____

Resurvey No. of Trip: _____

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

Survey Fee: _____
Transportation: _____
S + RS ___ SI
Fundes _____
Others _____

TOTAL _____