

ASS. REC. BY:

Carl PRS

CS3/MSB 21001911/Gvf3 -1

ASSIGNMENT

From: _____
Estimated Cost: _____

Date: _____

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

To Inspect Vehicle No: _____

at Workshop m/s *Mirage Autowerks*
of _____

Insured: **SJN 3694K**

Policy No. **29067068QMX**

Claims No. **633457**

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 Report: _____ Consistent?: Yes or No

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

Est. Repairs: **5** days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: **SMV 8168 C** Yr Regn: **2017**
Type: **Car** / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or _____

Make: **Toyota wish** c.c. **1798**

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

Sp. Reading: **20558** T/Radio: **Insured / Std / NI / NA**

Eng/No: _____

C/No: **JTDG20W80J00847**

Gen. Cond: **Good** / Fair / Poor / Burnt

Steering: **In order** / Jammed / Leaked / Burnt or _____

Brake: **In order** / Jammed / Leaked / Burnt or _____

Modi: Nil / S/Rim / STD **A/Rim** or _____

Tyre Size: F: **195/65R15**
R: **11**

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

Front

R/Bal. **6** mm

L/Bal. **6** mm

D.O.A. **29/1/21**

Survey held at **w/s**

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

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

Rear

R/Bal. **6** mm

L/Bal. **6** mm

D.O.I. **22-02-21**

Date / Time

Action / Instruction

\$3000 - \$4000

GIA Give later

20/5/21 Submit LS \$3800 (Red 1100, 22%)

Date/Time, File Pass to?

: Preli. Report
 : Final Report

Days Of Repair: **5**

Resurvey No. of Trip: _____

Survey Fee:

Transportation:

3 + RS. \$

Fees

Other

TOTAL

1) Date/Time, File Return to?

2) **20/5/21-Typist**

Report Fee

TP

LS \$3800

Add Fee:

: Site Insp (\$)

: Interview (\$)

: Tech. Insp (\$)

: Other (\$)