

ASSIGNMENT

From: _____ Date: _____ Yr Regn: *07/02/18*

Estimated Cost: _____

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

To Inspect Vehicle No: *SLW 6565J*

at Workshop m/s *Bmil.*

of _____

Insured: *SLW2970H*

Policy No. *DMPCSNW00164472000*

Claims No. *SNM21D202359/C02*

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
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Bal. or Market Value: *\$100k.*

IDAC Accident Rpt: _____ Consistent?: Yes or No

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

Est. Repairs: *3* days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Date: _____ Vehicle: IN / OUT

Person Contacted: *Dep 136*

The UIC / Chassis frame / Body Structure affected due to collision.

Veh No: *SLW 6565J*

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

Truck / Trailer or *CA1*

Make: *Mer Benz GLA 180* c.c. *1595*

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

Sp. Reading: *K3072* T/Radio: *Insured / Std / NI / NA*

Eng/No: _____

C/No: *WDC 1569422J 450 483*

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: _____ R: *235/50R18*

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

TOYO / YOKO or *Continental*

Front *6* mm Rear *6* mm

R/Bal. *6* mm R/Bal. *6* mm

L/Bal. *6* mm L/Bal. *6* mm

D.O.A. *23/4/21* D.O.I. *3/6/21*

Survey held at _____

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

The UIC / Chassis frame / Body Structure affected due to collision.

5/6/21

07/06/21 Submit PRS.

PRS Nicotthul.

LTA \$51691

vehicle pass out 5-6-21

Repair range 3-4k.

Date/Time, File Pass to?

☐

Preli. Report

1) 07/06 Typist

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair: 3

Resurvey No. of Trip: 2

Survey Fee:

Transportation:

Add Fee:

☐

Site Insp (\$

) S + RS, SI

☐

Interview (\$

) Photos

☐

Tech. Invs (\$

) Others

☐

Weekend (\$

)

Report Format: MER-PRS

Lump Sum / I.B.I: (\$

TOTAL