

ASS. REC. BY:

64
PAS

ASSIGNMENT

(31 Jan 2010)

From:

Date:

Veh No:

SJV4163 C

Yr Regn: 26 Jan 2010

Estimated Cost:

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

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

Truck / Trailer or

To Inspect Vehicle No:

Make:

Mit Lancer 1.6 c.c 1584

at Workshop m/s

Teamwork garage

Colour:

Grey

A/C: Insured / Std / NI / NA

of

Sp. Reading:

162225

T/Radio: Insured / Std / NI / NA

Insured:

Eng/No:

Policy No.

C/No:

JMYSNCS3A 94004800

Claims No.

Gen. Cond: Good / Fair / Poor / Burnt

Sum Insured:

Excess:

Steering: In order / Jammed / Leaked / Burnt or

(Client's Record)

Brake: In order / Jammed / Leaked / Burnt or

Make of Veh:

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

(Policy Condition)

Tyre Size:

F:

195/60R15 (Rapid)

R:

11

(Yoko)

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

N/S	O/S

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

TOYO / YOKO or

Bal. or Market Value:

\$23K

Front

Rear

IDAC Accident Rpt:

Consistent? : Yes or No

R/Bal.

6

mm

R/Bal.

6

mm

GIA / PR Seen:

Consistent? : Yes or No

L/Bal.

6

mm

L/Bal.

6

mm

Est. Repairs:

3 days

Res.: Yes or No

D.O.A.

D.O.I.

30-04-21

Lum Sum:

20 %

3 Val.: Yes or No

Survey held at

W/S

4pm

CA / REV / REP. / 24 HRS

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

Frt o/s

Date:

Person Contacted:

Vehicle: IN / OUT

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

Date / Time

Action / Instruction

Rebate: 9516

\$2000 - \$3000

Date/Time, File Pass to?

: Preli. Report

Days Of Repair:

1)

: Final Report

Resurvey No. of Trip:

Date/Time, File Return to?

2)

Add Fee:

: Site Insp (\$

: Interview (\$

: Tech. Insp (\$

: Material (\$

Survey Fee:

Transportation:

\$ + RS \$

Photos

Other:

Report Form