ASS. REC. BY: GQ
PRS
MSG

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s Lys Engineering

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.

Bal. or Market Value: $40K

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 6 days   Res.: Yes or No

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

CA / REV / REP. / 24 HRS

                          Vehicle: IN / OUT

Date: Person Contacted:

Veh No: GBD 3594 M   Regn: 0 9 Sep 2014

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or   2882

Make: Toyota Dyna 150cc   2882

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

Sp.Reading: 2326.28   T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: TTPAT35Y80K.203768

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 195R15
            R: 155R12

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	6/6 mm
L/Bal.	6 mm	L/Bal.	6/6 mm
D.O.A.		D.O.I.	12-04-21

Survey held at w/s   5pm

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

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

| N/S | O/S |

Date / Time	Action / Instruction
	$ 5000 — $6000
	SUBMIT LUMP SUM $5250, 5DAYS
	RED: 6900;56%

Date/Time, File Pass to? [ ] : Preli. Report

[ ] : Final Report

1)

Date/Time, File Return to?

2)

Report Format: prs

Lump Sum / Detail

Days Of Repair: 5

Resurvey No. of Trip:

Add Fee: [ ] : Site Insp ($
         [ ] : Interview ($
         [ ] : Tech. Inve ($
         [ ] : Misc Fee ($

Survey Fee:

Transportation:

S + RS.__SI

Photos

Other:

TOTAL