Jasllı

ASS. REC. BY: NAZ | REF: .MG | CHANG LIS

ASSIGNMENT

From: ______ Date: ______

Estimated Cost: ______

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

To Inspect Vehicle No: ______

at Workshop m/s ______

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
LHS	RHS

Bal. or Market Value: ______

IDAC Accident Rport: ______ Consistent? : Yes or No

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

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

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: ______ Person Contacted: ______

Veh No: SHA8648D Yr Regn: 31 MAY 2017

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

Make: TOYOTA PRIUS HYBRID (c.c) 1,798

Colour: YELLOW A/C: (Insured) / Std / NI / NA

Sp.Reading: 505,989 T/Radio: (Insured) / Std / NI / NA

Eng/No: ______

C/No: JTDKB3FU303556977

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

Steering: (Inorder) / Jammed / Leaked / Burnt or ______

Brake: (Inorder) / Jammed / Leaked / Burnt or ______

Modi: Nil / S/Rim (steel) / (STD) A/Rim (alloy) or ______

Tyre Size: F: 195/65 R15

R: 〃

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or WESTLAKE → tyre brand

Front			Rear		
R/Bal.	5	mm	R/Bal.	5	mm
L/Bal.	5	mm	L/Bal.	5	mm

D.O.A. 4/6/2021 D.O.I. 7/6/2021

Survey held at CDGE LOYANG

Des. of Damages: (Frt) / Rear / O/S / (N/S) / U/C / Rooftop or ______ (FRONT, OFFSIDE, NEARSIDE, UNDERCARRIAGE)

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

Date / Time	Action / Instruction
	MG LIS

Date/Time, File Pass to?

1) ______

Date/Time, File Return to?

2) ______

☐ : Prell. Report

☐ : Final Report

Days Of Repair: ______

Resurvey No. of Trip: ______

Add Fee: ☐ : Site Insp ($ ______)

☐ : Interview ($ ______)

☐ : Tech. Invs ($ ______)

☐ : Weekend ($ ______)

Report Format: ______

Lump Sum / I.B.I: ($ ______)

Survey Fee:	
Transportation:	
__S + RS__SI	
Photos	
Others	
TOTAL	