

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD/TP/WS/TP RES/OD RES/EVA/INV/MY

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: SMQ 4452J

Policy No. _____

Claims No. MT/1133989-002

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
LMS	RMS

Bal. or Market Value: _____ X X X

IDAC Accident Rport: _____ Consistent?: Yes or No

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

Est. Repairs: 2 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: SH 7218B Yr Regn: 7 OCT, 2016

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

Truck / Trailer or

Make: TOYOTA PRIMS HYBRID (C.C) 1,798

Colour: BLUE A/C: Insured / Std / NI / NA

Sp. Reading: 649,361 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTDKB3FU603530597

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) / Rim or

Tyre Size: F: 195/65 R15

R: 11

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

TOYO / YOKO or WESTLAKE brar

Front 4 mm Rear 5 mm

R/Bal. 4 mm L/Bal. 5 mm

L/Bal. 4 mm L/Bal. 5 mm

D.O.A. 7/16/2021 D.O.I. 8/16/2021

Survey held at CDGE LOYANG

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

FRONT OFF SIDE NEAR SIDE

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

RNC L/S

Date / Time	Action / Instruction
15/6/21	Final fig \$630 confirmed by email (Red 1100.60,63%)

Date/Time, File Pass to? : Prell. Report

1) : Final Report

Date/Time, File Return to?

2) 16/6/21-Typist

Report Format: TP

Lump Sum / I.B.I: (\$ 630.00)

Days Of Repair: 2

Resurvey No. of Trip: 1

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech. Invs (\$ _____)

: Weekend (\$ _____)

Survey Fee: _____

Transportation: _____

_____ S + RS _____ SI

Photos _____

Others _____

TOTAL _____