

ASS. REC. BY:

NA2

REF:

Ala

LOKE

L/S

## 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 |
| LMS | RMS |

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: 4 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: SHA 33062 Yr Regn: 25 Jul / 2017Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or \_\_\_\_\_

Make: TOYOTA PRIUS HYBRID (c.c) 1,798Colour: BLUE A/C: Insured / Std / NI / NSp. Reading: 599,322 T/Radio: Insured / Std / NI / N

Eng/No: \_\_\_\_\_

C/No: STOKB37FUI03562941Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: NII / S/Rim / STD / Rim orTyre Size: F: 195/65 R15R: 11BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / 7TOYO / YOKO or WESTLAKE

Front

Rear

R/Bal. 4 mm R/Bal. 5 mmL/Bal. 4 mm L/Bal. 5 mmD.O.A. 23/6/2021 D.O.I. 24/6/2021Survey held at COGE LOYANGDes. 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

ATG L/S

Date / Time Action / Instruction

Date/Time, File Pass to?

☐

: Prell. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Report Format : \_\_\_\_\_

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

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Add Fee:

☐

: Site Insp (\$ \_\_\_\_\_ )

☐

: Interview (\$ \_\_\_\_\_ )

☐

: Tech. Invs (\$ \_\_\_\_\_ )

☐

: Weekend (\$ \_\_\_\_\_ )

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

Photos

Others

TOTAL



## JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

### Job Requisition

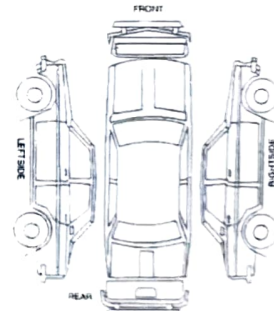
|  |  |   |   |
|--|--|---|---|
| 1. Date: <u>23/6/21</u> Time Received: <u>1017</u>   |  | 3. Vehicle Type:<br><input type="checkbox"/> Private<br><input checked="" type="checkbox"/> Taxi (CTPL/CCPL)<br><input type="checkbox"/> Fleet<br><input type="checkbox"/> STK (Boon Lay) | 4. Type of Towing:<br><input checked="" type="checkbox"/> Normal Tow<br><input type="checkbox"/> King Dolly<br><input type="checkbox"/> Flat Bed<br><input type="checkbox"/> Crane-up |
| 2. <input type="checkbox"/> New <input type="checkbox"/> SPARK Kakis<br>Name of Customer : <u>MR NG</u><br>Contact No. : <u>97738577</u><br>Vehicle No. : <u>SHA33062</u><br>Make / Model / Colour : <u>PRIUS</u><br>Email : |  | 5. Nature of Service:<br><input type="checkbox"/> Jumpstart<br><input checked="" type="checkbox"/> Recovery<br><input type="checkbox"/> Change Tyre / Battery                             | 6. Parts Replaced/Remarks:  |

|   |   |
|---|---|
| 7. Location: <u>47 OWEN RD</u>  | 8. Vehicle Tow - In Workshop:<br><input type="checkbox"/> Smoky Exhaust <input type="checkbox"/> Wheel Jammed<br><input type="checkbox"/> Overheating <input type="checkbox"/> Steering Faulty<br><input type="checkbox"/> Brake Faulty <input type="checkbox"/> Alternator Faulty<br><input type="checkbox"/> Starting Problem <input type="checkbox"/> Loss Power<br><input checked="" type="checkbox"/> Accident <input type="checkbox"/> Engine Stalled<br><input type="checkbox"/> Return Taxi |
| 9. Preferred Workshop:<br><input type="checkbox"/> Braddell <input checked="" type="checkbox"/> Loyang <input type="checkbox"/> Pandan<br><input type="checkbox"/> Sin Ming <input type="checkbox"/> Sungei Kadut <input type="checkbox"/> Ubi<br><input type="checkbox"/> Komoco (UBI / Leng Kee) <input type="checkbox"/> Cycle & Carriage (PD)<br><input type="checkbox"/> Others: _____ |   |

10. Odometer Reading : \_\_\_\_\_  
Fuel Level : 

|   |     |     |     |   |
|---|-----|-----|-----|---|
| F | 1/4 | 1/2 | 3/4 | E |
|---|-----|-----|-----|---|

11. Radio / CD Player  
☐ OK  
☐ Faulty  
☐ Not tested



# : Cracked X : Dented  
/ : Scratched O : Missing

Signature of Customer

### Job Attended

12. Tow Truck / Recovery Van : ☐ VRS ☐ QA ☒ GAO ☐ OTHERS  
Name of Driver : YI CHONG  
Vehicle No. : YN3901K  
Time Dispatch : 1017  
Time of Arrival : 1110  
Time Completed : 1159

### Cash Invoice Details (if applicable)

13. Cash Invoice No. : \_\_\_\_\_

### Customer Acknowledgement

- I have been advised to remove all valuable items in my vehicle, including Global Positioning System (GPS), audio compact disk, thumbdrive, carpark coupons, cash cards, spectacles, pen, etc.  
I understand that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses.  
Surcharge: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.

23/6/21

Date

1110

Time

Signature of Customer

### 4. WORKSHOP

Name of Attending Staff/Guard

Date & Time of Arrival

Signature of Attending Staff/Guard

CUSTOMER'S COPY