

ASS. REC. BY:

Steve

CS/40121007789/ET73

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:

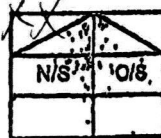
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

IDAC Accident Report:

Consistent? : Yes or No

SIA / PR Seer:

Consistent? : Yes or No

Est. Repair:

days

Res.: Yes or No

Cum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SLO5963A

Yr Regn:

23/6/16

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

Truck / Trailer or

Make:

BMW X4

c.2

1997

Colour:

Black

A/O:

Insured / Std / NI / N

Sp. Reading

45652

T/Radio:

Insured / Std / NI / N

Eng/No:

C/No:

WBA X4 120290 R65159

Gen. Cond: Good / Fair / Poor / Bupl

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

245/50 RT8

R:

11

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

TOYO / YOKO or

Pirelli

Front

Rear

R/Bal.

5

mm

R/Bal.

5

mm

L/Bal.

5

mm

L/Bal.

5

mm

D.O.A.

25/6/21

D.O.A.

30/6/21

Survey held at

Performance Motors

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

FM LH

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

Date / Time	Action / Instruction
	MV-120K
	13270.45
	Confirm \$8,693.90. 3days
	RED: 4576.55:34%

File/Time, File, Ross 107



Prell. Report

11/08/21-Typist



Final Report

File/Time, File Return 107

11/08/21-Typist

File/Time, File Return 107

OD

8,693.90

Days Of Repair:

3

Resurvey No. of Trips:

1

Add Fee:



Site Insp (\$



Interview (\$



Tech. Inve (\$



Weekend (\$

Survey Fee:

3x25=75

Transportation:

250+75

S + RS \$1

60

Photo

80

Culture

60

TOTAL

525

11/8/21