(08/11/13) wef

ASS. REC. BY:

REF: CS/GA1210054871R14f3-1

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No: YN 1911U

at Workshop m/s

of

Insured: SJU 5287C

Policy No.

Claims No. CLMOMVP000001144

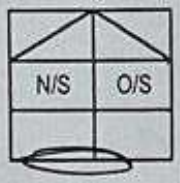
Sum Insured: Excess:

(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 Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 4 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: YN 1911U Yr Regn: 2011 JAN

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

Truck / Trailer or

Make: MITSUBISHI FE83BEA c.c 2977

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

Sp.Reading 199942 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: FE83BEA20496

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: 7.00-16

R: 185R14C

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

TOYO / YOKO or SWALLOW

Front		Rear	
R/Bal.	7 mm	R/Bal.	7/7 mm
L/Bal.	7 mm	L/Bal.	7/7 mm
D.O.A.	03/05/21	D.O.I.	10/09/21

Survey held at A-TEC

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

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

Date / Time Action / Instruction

Submit L/S $1850, 4 repair days.
(RED $14450; 89%)

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

1) 15/11 TYPIST ☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 4

Resurvey No. of Trip:

Survey Fee:

Transportation:) ___S + RS___SI

Add Fee: ☐ : Site Insp ($) Photos

☐ : Interview ($) Others

☐ : Tech. Invs ($

Report Format : TP

Lump Sum / ~~I.B.I.~~ ($ $1850