

ASS. REC. BY:

Tanglin

REF:

SMKT CS3/SMR21005952/T1uc

ASSIGNMENT

CoE 2025 Oct.

From: _____ Date: _____

Estimated Cost: _____

OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MVTo Inspect Vehicle No: **SMZ 1582P**at Workshop m/s **SNG AUTO TRADING**

of _____

Insured: **SG 5856C**

Policy No. _____

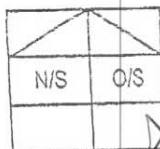
Claims No. **BUS/05/21/5013**

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: **\$28K**

IDAC Accident Rpt: _____ Consistent?: Yes or No

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

Est. Repairs: **10** days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

WP' PRS'

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: **SMZ1582P** Yr Regn: **2005, Oct.**Type: ☒ M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: **Volkswagen Beetle 1.6 cc 1595.**Colour: **white** A/C: **Insured / Std / NI / NA**Sp. Reading: **1198/9.** T/Radio: **Insured / Std / NI / NA**

Eng/No: _____

C/No: **WVWEEZ9CE6M50045.**Gen. Cond: **Good** / Fair / Poor / BurntSteering: **Inorder** / Jammed / Leaked / Burnt or _____Brake: **Inorder** / Jammed / Leaked / Burnt or _____Modi: **Nil** / S/Rim / STD A/Rim or _____Tyre Size: **F: 225/45R17**

R: _____

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

TOYO / YOKO or **Falken**

Front

R/Bal. **6** mmL/Bal. **6** mm

D.O.A. _____

Survey held at

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

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

Rear

R/Bal. **6** mmL/Bal. **6** mm

D.O.I.

18/5/21 0340pm
SNG AUTO TRADING

Date / Time Action / Instruction

REPAIR RANGE : \$7000-9000 , 10 DAYS

18/6/2021 Submit PRS.

Date/Time, File Pass to?

☐ : Preli. Report

1) 18/6 TYPIST

☐ : Final Report

Date/Time, File Return to?

2) _____

Report Format: **TP**

Lump Sum / L.B.J. (\$) _____

Days Of Repair: **10**Resurvey No. of Trip: **2**Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

\$ + RS. \$ _____

Photos

Others

TOTAL