

CS3/ A/G 21000947/Gvf3

ASSIGNMENT

(2021)

SMF 6649 D

16 Jan 2009

Estimated Cost

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

Inspect Vehicle No.

Workshop m/s

Elite Performance

Insured

SMN 982M

Policy No

1900122326

Claims No

9095418535SG

Insured

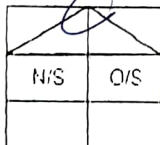
Excess

(Client's Record)

Make of Veh:

(Policy Condition)

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



Actual or Market Value:

\$600K

DAC: Accident Report

Consistent? : Yes or No

SLA / PR Seen

Consistent? : Yes or No

Est. Repairs

3

days

Res:

Yes or No

Turn Sum:

20

%

3 Val:

Yes or No

DA / REV / REP. / 24 HRS

Date

Person Contacted

Vehicle: IN / OUT

Type

Car / M Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make

Meru C200

CC 1796

Colour

Black

A/C

Insured / Std / NI / NA

Sp Reading

197913

T/Radio

Insured / Std / NI / NA

Eng/No

C/No:

WDD 2040412 A 258168

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:

225/45 R17

R:

11

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

TOYO / YOKO or

Front

Rear

R/Bal:

6

mm

R/Bal:

6

mm

L/Bal:

6

mm

L/Bal:

6

mm

D.O.A

16/1/21

D.O.I

25-01-21

Survey held at

W/S

Des. of Damages:

Fr

Rear / O/S / N/S / U/C / Rooftop or

1pm

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

Date / Time

Action / Instruction

Call: 29263

No Body injured.

7/4/21

Submit DAR, 3 days

26/7/21

Submit LS \$3900 (Red 1700,30%)

Date/Time: File Pass to?

☐

Preli. Report

1)

☐

Final Report

Date/Time: File Return to?

26/7/21-Typist

Days Of Repair: 3

Resurvey No. of Trip:

Survey Fee:

Transportation

Site Fee

Other

Other

Adm Fee:

☐

Site Insp: \$

☐

Interview: \$

☐

Photograph: \$

☐

Other: \$

TP