

ASS. REC. BY:

REF:

C72/21008901/Kqc

Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____ AT

of _____

Insured: _____

Policy No. _____

Claims No. SNM21D204706/C02

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 |
| | |

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

Est. Repairs: 4 03 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SFH 6336D Yr Regn: 09, 17

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

Truck / Traller or _____

Make: Toy CHAR c.c. 1797

Colour M.P. White A/C: Insured / Std / NI / NA

Sp. Reading 115078 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: 8YX10 2051365

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 225/60R17

R: _____

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

TOYO / YOKO or _____

Front Rear

R/Bal. 6 mm R/Bal. 7 mm

L/Bal. 6 mm L/Bal. 7 mm

D.O.A. 17/8/21 D.O.I. 30/8/2021

Survey held at _____

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

O/S FR body

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

/ EM not ready

31/08/21 @ 3.26pm informed Billy, we are pending for estimate from repairer.

09/09/21 @ 3.34pm revised to Billy Tan via Merimen.

Kenneth confirmed LS \$1350, 4 days (Red \$2612.50, 66%)

Date/Time, File Pass to?

☐ : Prell. Report

Days Of Repair: 4

09/09 Typist

☐ : Final Report

Resurvey No. of Trlp: 1

Date/Time, File Return to?

Survey Fee:

Transportation:

S + RS SI

Furnish

Others

TOTAL

Add Fee: ☐ : Site Insp (\$☐ : Interview (\$☐ : Tech Invs (\$☐ : Weekend (\$

Report Format: MER-TP

Lump Sum H.B. (\$) 1350