

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 QD TP / N/S / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: SGQ 1706T
 at Workshop m/s: AP AUTO
 of _____
 Insured: SMB 32T
 Policy No. _____
 Claims No. _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

Veh No: SGQ1706T Yr Regn: 08 Jan/2007
 Type M.Car M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: HONDA JAZZ 1.4A c.c. 1339
 Colour: Yellow A/C: Insured / Std / NI / NA
 Sp. Reading: 287158 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: JHMGD18507S202802 *
 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: 195/50R15
 R: 195/50R15

(Policy Condition)

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

<input checked="" type="checkbox"/>	<input type="checkbox"/>
N/S	O/S
<input type="checkbox"/>	<input type="checkbox"/>

Bal. or Market Value: \$ _____
 IDAC Accident Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 5 days Res.: Yes or No
 Lum Sum: 20 % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____ Vehicle: IN / OUT

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or HANKOOK

<u>Front</u>	<u>Rear</u>
R/Bal. <u>6</u> mm	R/Bal. <u>6</u> mm
L/Bal. <u>6</u> mm	L/Bal. <u>6</u> mm
D.O.A. _____	D.O.I. <u>07-09-2021</u>
Survey held at _____	<u>W/S 5:30PM</u>

 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
N/S FRONT
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	Total Rebate Amount \$1,688

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

Days Of Repair: _____
 Resurvey No. of Trip: _____

1) _____
 Date/Time, File Return to?
 2) _____
 Report Filed at _____
 Long Code / MPB No _____

Add Fee: : Site Insp (\$ _____)
 : Interview (\$ _____)
 : Tech. Insp (\$ _____)
 : W/weekend (\$ _____)

Survey Fee:	
Transportation:	
_____ \$ + RS. _____ SI	
Photos	
Other:	
TOTAL	