17:40 36%

ASS. REC. BY: Tan f Kh | REF: CSS/AIG 21009814/ Tc 63

ASSIGNMENT

COE 2024 oct

From: Date:

Estimated Cost:

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

To inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

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: 23K

IDAD Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS VIP – PRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: GBD4061C Yr Regn: 2014, oct

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

Make: Nissan Cabstar c.c 2953

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

Sp.Reading: 16785 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: JN1SC2F24Z0856564

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 195/R15

R: 165/R15

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	6/6 mm
L/Bal.	6 mm	L/Bal.	6/6 mm
D.O.A.		D.O.I.	24/9/21 @545pm

Survey held at: Yeow Koon

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

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

Date / Time	Action / Instruction
	No estimate

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2)

[ ] : Prell. Report

[ ] : Final Report

Report Format:

Lump Sum / I.B.I: ($)

Days Of Repair:

Resurvey No. of Trip:

Add Fee: [ ] : Site Insp ($)

[ ] : Interview ($)

[ ] : Tech. Inve ($)

[ ] : Weekend ($)

Survey Fee:	
Transportation:	
__B + RS __@	
Photos	
Others	
TOTAL	

Upload to OneDrive