ASS REC BY: Jaslin NAZ | REF: ASM

ASSIGNMENT

From _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s NSI

of 2 KB AVE 2, KD AUTOHUB, #01-17

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.

X X X

N/S	O/S
LHS	RHS

X X X

Bal. or Market Value: 36K

IDAC 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

Vehicle: IN / OUT

Date _____ Person Contacted: _____

Veh No: SKP 3737Z Yr Regn: 30 JUL 2014

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

Make: VOLKSWAGEN JETTA c.c 1,390

Colour: WHITE A/C: Insured / Std / NI

Sp.Reading: 187,259 T/Radio: Insured / Std / NI

Eng/No: _____

C/No: WVWZZZ16ZEM035344

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: 225/40 R18

R: 11

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

Front		Rear	
R/Bal.	8 mm	R/Bal.	15
L/Bal.	8 mm	L/Bal.	15
D.O.A.	22/9/2021	D.O.I.	23/9/2021

Survey held at NSI

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

(Frt → FRONT; O/S → OFFSIDE; N/S → NEARSIDE)

The U/C / Chassis frame / Body Structure affected due to collis

Date / Time	Action / Instruction
	ASM C/S
	COE Rebate: $22,755.00
	Repair Limit: 12.5K

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) _____

☐ : Prell. Report

☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ : Tech. Invs ($ _____)

☐ : Weekend ($ _____)

Report Format : _____

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

Survey Fee:	
Transportation:	
___S + RS___SI	
Photos	
Others	
TOTAL	