REC'D / FILE BY: GQ | REF: CS4/MSG21010329/Gvf3

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s Kan Fook Sing

of

Insured: XD 7044Y

Policy No. 30001744264

Claims No. 263525

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: $89k

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 5 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: YP9299R Yr Regn: 01 Aug 2018

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

Make: MITSUBISHI FUSO FK62 c.c 7545

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

Sp.Reading 77003 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: FK62FMA40023

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: 265/70R19.5

R: 265/70R19.5

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	6/6 mm
L/Bal.	6 mm	L/Bal.	6/6 mm

D.O.A. 2/10/2021 D.O.I. 25-10-2021

Survey held at W/S 11:30

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

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

Date / Time	Action / Instruction
11/3/22	Submit preli report-revised fig $1300 check items $6300

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2) 11/3/22-typist

☑ : Preli. Report

☐ : Final Report

Days Of Repair: 5

Resurvey No. of Trip:

Height measurement-$500

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Invs ($)

☐ : Weekend ($)

Survey Fee:

Transportation:

S + RS. SI

Photos

Other:

TOTAL

Report Format:

Lump Sum / UPD: