

ASS. REC. BY:

Tanjah

REF:

CS/416240533/T1983

ASSIGNMENT

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. **5529720341SG**

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: **3** days Res.: Yes or No

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

CA / REV / REP. / 24 HRS **WP**Date: _____ Person Contacted: **Simon** Vehicle: IN / OUTVeh No: **SBS8667A** Yr Regn: **2009, June**Type: M.Car / M.Cycle / **Bus** / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: **Scania KUB4X2** c.c. **9290**Colour **Mulh** A/C: Insured / Std / NI / NASp. Reading **895976** T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: **Y52K4X20001864535**

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: **NI** / S/Rim / STD A/Rim orTyre Size: F: **275/20R22.5**R: **225/20R22.5** (D)

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

TOYO / YOKO or

Front _____ Rear _____

R/Bal. **8** mm R/Bal. **8/8** mmL/Bal. **8** mm L/Bal. **8/8** mmD.O.A. _____ D.O.I. **14/10/21 @ 1130 am**Survey held at **SBS Pedak Depot**

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

O/S Rear

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

Date / Time	Action / Instruction
12/01/22	Submit final fig \$1130, 3 days. (repair cost not conclude)

Date/Time, File Pass to?

☐ : Preli. Report

1) 12/01 Typist

☐ : Final Report

Date/Time, File Return to?

2) _____

Report Format: **MER-TP****Lump Sum / L&A (7 1130)**Days Of Repair: **3**Resurvey No. of Trip: **2**

Survey Fee:

Transportation:

S + RS. \$

Photos

Others

TOTAL

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