42 ASS. REC. BY: NAZ | REF: EGI | LIS

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. _____

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
LHS	RHS

Bal. or Market Value: $19K

IDAC Accident Rport: _____ 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

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SJP 4291 Y Yr Regn: 25 MAR 2009

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

Make: MITSUBISHI LANCER (c.c) 1,499

Colour: BLACK A/C: Insured / Std / Nil

Sp.Reading: 181,064 T/Radio: Insured / Std / N

Eng/No: _____

C/No: JMYSRCY2A9U004079

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: 205/60R16

R: 11

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

Front		Rear	
R/Bal.	8 mm	R/Bal.	8
L/Bal.	8 mm	L/Bal.	8
D.O.A.	30/3/2021	D.O.I.	17/11/2021

Survey held at MOVA

Des. of Damages: Frt (FRONT) / Rear / O/S (OFFSIDE) / N/S (NEARSIDE) / U/C (UNDERCARRIAGE) / Rooftop or _____

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

EGI LIS

Date / Time	Action / Instruction
	COE Rebate $5,997.00
	Repair Lim7 $12K

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 _____