ASS. REQ. BY: Steve | REF: CS/AIG 21011007/Ev f3

ASSIGNMENT

From: Date:

Estimated Cost:

OD / YP / WS / IP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

at Workshop m/s

at

Insured: GBH 9056P

Policy No. 1900172227

Claims No. 3285901053SG

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
	X

Bal. or Market Value:

IDAC Accident Report: Consistent? : Yes or No

SIA / PR Seen: Consistent? : Yes or No

Est. Repairs: days Res.: Yes or No

Com Sum: % S Vol.: Yes or No

QA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SBS 8399J Yr Regn: 2008

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

Make: Scania K113 4X2 C.C. 8867

Colour: Multi-Colour A/C: Insured / Std / Nil / N

Sp.Reading: 1039969 T/Radio: Insured / Std / Nil / N

Eng/No:

C/No: YS2K4X20001813179

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Locked / Burnt or

Brake: Inorder / Jammed / Locked / Burnt or

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

Tyre Size: Fr 295/80R22.5

Rr "

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

Front		Rear	
R/Bal.	4 mm	R/Bal.	4 mm
L/Bal.	4 mm	L/Bal.	4 mm
D.O.A.	22/10/21	D.O.I.	28/10/21

Survey held at: SBS Transit

Det. 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
	Waiting Estimate
29/11/21	Submit $1120.52 (un-confirmed) (Red 0)

Date/Time, File Received: ☐ : Prell. Report ☐ : Final Report

Days Of Repair: 2

Resurvey No. of Trips:

Date/Time, File Returned: 29/11/21-typist

Add Fee: ☐ : Site Insp ($) ☐ : Interview ($) ☐ : Tech. Inve ($) ☐ : Weekend ($)

Survey Fee: Transportation: Brake: Others: TOTAL:

Scanned with CamScanner