ASS. FILE BY: Taufiq REF: CS3/CT12/006098/TIVC-1

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: GBJ 111L

Policy No. DMCVSNW00115102000

Claims No. SNM21D202937/C02

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: 473K.

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 WP PRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SKW1959B. Yr Regn: 2015 Oct.

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

Make: Toyota Harrier 2.0 cc 1986.

Colour Black. A/C: Insured / Std / NI / NA

Sp.Reading 181329 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: ZSU60005214 2

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: 255/45R20

R: " "

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.	21/5/21	D.O.I.	24/5/21

Survey held at Garage 13

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
	GIA upload in views
	Repair Range: $13000 - $15000 14 days
28/5/21	Submit PRS,repair range $13,000-$15,000
16/11/21	Submit LS $16,800 (Red 5900, 26%)

Date/Time, File Pass to? ☐ : Prell. Report

1) ☐ : Final Report

Date/Time, File Return to?

2) 16/11/21-typist

Days Of Repair: 12

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Insp ($)

☐ : Weekend ($)

Survey Fee:

Transportation: $ + RC $

Photos

Other:

Total:

Repair Estimate: TP

Lump Sum / LS: LS $16,800