

ASS. REC. BY:

REF:

AIG/21012009/1kp

C

Kenneth

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. _____

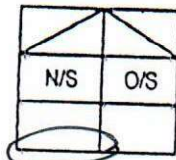
Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 03 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP / 24 HRS

Date: 01/24 Person Contacted: _____

Vehicle: IN / OUT

Veh No: SYM 8545E Yr Regn: 01, 09Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Toy Vios E c.c. 1497Colour: th. Gold A/C: Insured / Std / NI / NASp. Reading: 823483 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: NR05314Y9305097397Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rlm / STD A/Rlm orTyre Size: F: 185/65R15

R: _____

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

Front

Rear

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 28/11/21 D.O.I. 30/11/2021

Survey held at _____

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

Rear N/S

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

Date / Time Action / Instruction

21/12 21.20 @ 24501 Cahr

Date/Time, File Pass to?

☐ : Prell. Report

Days Of Repair: _____

1)

☐ : Final Report

Resurvey No. of Trip: _____

Date/Time, File Return to?

2)

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

Survey Fee:

Transportation

S + RS \$

Fees

Others

TOTAL

Report Format :

Lump Sum / I.B.I: (\$

CARIS AUTOWORKS PTE LTD
 160 SIN MING DRIVE
 #05-03 SIN MING AUTOCITY
 SINGAPORE 575722
 (COMPANY REGISTRATION NO: 201825799E)
 TEL: 62589831
 FAX: 62585349

*Not Withheld
 1/1pm @ 2450h
 Repair After Pain
 5 days*

ESTIMATE REPAIR COST TO TOYOTA (VIOS) REG NO : SJM 8545 E

			S\$	
1 PC	BUMPER (REAR)	<i>B</i>	457.50	<i>✓</i>
1 PC	BOOT (REAR)	<i>B</i>	658.70	<i>✓</i>
1 PC	BOOT LOCK (REAR)	<i>ML</i>	125.97	<i>✓</i>
1 PC	BUMPER REFLECT (REAR LEFT)	<i>CM</i>	110.80	<i>✓</i>
1 PC	PARKING SENSOR (REAR LEFT)	<i>ML</i>	130.00	<i>✓</i>
1 PC	TAIL LAMP (LEFT)	<i>CM</i>	277.00	<i>✓</i>
1 PC	TOYOTA LOGO	<i>ML</i>	52.15	<i>✓</i>
1 PC	VIOS LOGO	<i>ML</i>	44.20	<i>✓</i>
1 PC	E LOGO	<i>ML</i>	31.30	<i>✓</i>
	<i>Rear bumper bracket</i>	<i>ML</i>	<i>63.70</i>	<i>✓</i>
	<i>4 " n retainer</i>	<i>CM</i>	<i>98.33</i>	<i>✓</i>
TOTAL			1887.62	
LESS 25%			471.91	
TOTAL			1415.71	

LABOUR & MISC CHARGES

PANEL KNOCKING	1600.00	<i>700</i>
SPRAY PAINTING	1000.00	<i>800</i>
BODY CLIPS	<i>ML</i> 50.00	<i>✓</i>

TOTAL 4065.71

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer
 Signature:
 Date: