REC'D / FILE BY: GQ | REF: CS/CTI21012441/Gqy3

ASSIGNMENT

From: Date:

Estimated Cost:

[OD] / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

at Workshop m/s SKM GARAGE

of

Insured:

Policy No.

Claims No. SNM21D206855/C01

Sum Insured: Excess: 1500

(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: $208k U/C

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 8 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: SNB1576Y Yr Regn: 25 May/ 2017

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

Make: MERCEDES BENZ S320L c.c 2996

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

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

Eng/No:

C/No: WDD2221622A304504 *

Gen. Cond [Good] / Fair / Poor / Burnt

Steering: [norder] / Jammed / Leaked / Burnt or

Brake: [norder] / Jammed / Leaked / Burnt or

Modi : Nil / S/Rim / [STD A/R]m or

Tyre Size: F: 245/45R19

R: 245/45R19

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.		D.O.I.	09-12-2021

Survey held at W/S 3PM

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
	Yes [No] BI Involved
10/12/21@2.09pm	revert to Tan Kah Leong by email.
16/12/21@3.05pm	So Chow informed C/A via Merimen.
16/12/21@4.50pm	Informed Yoke Peng C/A & ex:$1500 by email.

Date/Time, File Pass to? [ ] : Preli. Report

1) [ ] : Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Add Fee: [ ] : Site Insp ($)

[ ] : Interview ($)

[ ] : Tech. Invs ($)

[ ] : Weekend ($)

Survey Fee:

Transportation: S + RS. SI

Photos

Other:

TOTAL