S. REC. BY: Taym - REF: C53/45M	SSIGNMENT
<u> Ab</u>	
om: Date:	Veh No: SLE 7569L Yr Regn: 2016 1 July .
slimated Cost:	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
D / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
o Inspect Vehicle No:	Make: Nissan Sylphy. c.c. 1598
Workshop m/s	Colour Quey AJC: Insured / Std / NI / NA
f	Sp.Reading 723877 T/Radio: Insured / Std / NI / NA
nsured: SHF 685Y	Eng/No:
iourou.	C/No: MNTBBHS17 * 2002 73)5
Claims No. S2M03RUS	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
Suit listicu.	Brake: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Modi: Nil /S/Rim / STD A/Rim or
Make of Veh:	Tyre Size: F: 205/55/2/6
	R: 1 1
(Policy Condition)	O/S BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
Remark: The veh had commenced its N/S C repair at the time of inspection.	TOYO/YOKO or Towador.
<u> </u>	Front Rear
Bal. or Market Value: Consistent?: Yes or No	R/Bal. 6 mm , R/Bal. 6 mm
IDAC Accident reports	L/Bal. (2. mm L/Bal. 6 mm
GIA / PR Seen.	D.O.A. 24/1/2022 D.O.I. 6/3/27@130/
est. Repairs.	Survey held at Garege 13
Lum Sum:	, , , , , , , , , , , , , , , , , , , ,
CA / REV / REP. / 24 HRS Vehicle: IN	I/OUT
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction	
Report legit 3000 - 44000	4 days
10/3/22 Submit PRS, repair range \$3,	,000-\$4,000
	Days Of Repair: 4
Date/Time, File Pass to? : Preli. Report	Resurvey No. of Trip: Survey Fee:
1) ; Final Report	Resulted No. of Trip.
Date/Time, File Return to?	dd Fee: : Site Insp (\$)_s+Rssi
2) 10/3/22-typist	: Interview (\$) Photos
	: Tech. Invs (\$) Others
Reput Format:	. Cont. Hivo
Lump Sum / LBJ: CF	: Weel:end (\$