CS3/AIG21007677/Gqf3

ASS. REC. BY: cd PRS | REF: AIG

ASSIGNMENT

From: | Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s Garage B

of

Insured:

Policy No.

Claims No. 1674657819SG

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

Bal. or Market Value: $44K

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 10 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: GBG4627E Yr Regn: 17 Aug 2017

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

Make: Nissan NV200 1.5 c.c 1461

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

Sp.Reading 56761 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: VSKYBAM20Z0145443

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 175/70 R14

R: 11

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / 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.		D.O.I.	15-07-21

Survey held at W/S 4pm

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

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

Date / Time	Action / Instruction
	No Body Injured.
	Rebate : 2646Z
27/10/21	Submit DAR
11/02/22	Submit LS $10100, 10 days. (Red $7100, 41%)

Date/Time, File Pass to?

1) 11/02 Typist

Date/Time, File Return to?

2)

☐ : Preli. Report

☐ : Final Report

Days Of Repair: 10

Resurvey No. of Trip:

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

Survey Fee:

Transportation: S + RS SI

Photos

Other:

TOTAL

Report Format: TP

Lump Sum / Others: 10100