Denise

ASS. REC. BY: NAZ | REF: AIS | L/S

ASSIGNMENT

CS4/AIS22001211/LNtf3

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s CONNECT 3

of _____

Insured: _____

Policy No. _____

Claims No. LBAISCL2022-00002

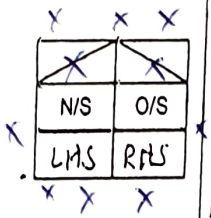
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value: 75K

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

Vehicle: IN / OUT

Date _____ Person Contacted: _____

Veh No: PA 9341L Yr Regn: 21 JAN 2010

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

Make: HIGER KLQ6109Q C.C 6,692

Colour YELLOW A/C: (Insured) / Std / NI

Sp.Reading NA T/Radio: (Insured) / Std / N

Eng/No: _____

C/No: LKLR1FST79B528753

Gen. Cond: Good / Fair / Poor / (Burnt)

Steering: Inorder / Jammed / Leaked / (Burnt) or _____

Brake: Inorder / Jammed / Leaked / (Burnt) or _____

Modi : Nil / S/Rim / (STD) / Rim or _____

Tyre Size: F: 11 R 22.5

R: 11

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or ANNALITE GOLDEN CROWN (LRT)

Front		Rear	
R/Bal.	4 mm	R/Bal.	4
L/Bal.	4 mm	L/Bal.	4
D.O.A.	7/2/2022	D.O.I.	9/2/2022

Survey held at CONNECT 3

Des. of Damages : Frt (FRONT) / Rear / O/S (OFFSIDE) / N/S (NEARSIDE) / U/C (UNDERCARRIAGE) / Rooftop or _____

The U/C / Chassis frame / Body Structure affected due to collis

Date / Time	Action / Instruction
	AIS L/S
	COE Rebate : $19,774.00
	uneconomical to repair. Recommend total loss.
	submit extensive total loss
	Market Value : S$ 75,000.00
	LTA Reimbursement Value : S$ 19,774.00
	Nett Value : S$ 55,226.00

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) _____

☐ : Prell. Report

☐ : Final Report

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ : Tech. Invs ($ 500)

☐ : Weekend ($ _____)

Report Format : _____

Lump Sum / I.B.I: ($ _____)

Survey Fee:	
Transportation:	
___S + RS, ___SI	
Photos	
Others	
TOTAL	