

ASS. REC. BY:

REF:

TM / 22001265144

Henneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MY

To Inspect Vehicle No: _____

at Workshop m/s 617mk

of _____

Insured: _____

Policy No. MK000435

Claims No. M2200693

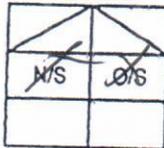
Sum Insured: _____ Excess: \$01-

(Client's Record)

Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value: \$46-50k

IDAC Accident Rpt: _____ 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 04/29

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SCG 30214 Yr Regn: 05, 69

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

Truck / Trailer or _____

Make: Volkswagen Beetle c.c. 1300

Colour: M. Green/White A/C: Insured / Std / NI / NA

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

Eng/No: _____

C/No: 119527736

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: _____

R: 195/60R15

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front _____ Rear _____

R/Bal. 8 mm R/Bal. 8 mm

L/Bal. 8 mm L/Bal. 8 mm

D.O.A. 7/2/22 D.O.I. 10/2/2022

Survey held at _____

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

The veh caught fire, the cause of fire

The UIC / Chassis frame / Body Structure affected due to collision.

probably due to short circuit at the engine compartment.

Date / Time Action / Instruction

7/loss.

Submit extensive Total loss report

Market value -> \$46,000 - \$50,000

LTA : \$18,911.00

Nett value: \$27,09.00 - \$31,089.00

Date/Time, File Pass to?

: Prel. Report

: Final Report

1)

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: : Site Insp (\$)

: Interview (\$)

: Tech Invs (\$ 500)

: Weekend (\$)

Survey Fee:

Transportation: _____
S + RS. SI

Fuel

Others SCDF

\$170.00

TOTAL

Report Format :

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