	ASS	SIGNMENT	*
n;	Detai	Veh No: SMY 4141P	Yr Regn: 20191
nated Cost;	Date:	Type: M. Gar / M. Cycle / Bus / Van / Lorry	
	I OD RES I EVA I INV I MV	Truck / Trailer or	
Inspect Vehicle No:		Make: Youda Shuff	e c.c 1496
Norkshop m/s			A/C: Insured / Std / NI / NA
			T/Radio: Insured / Std / NI / NA
sured:		Eng/No:	
		C/No: 0 6K82(01	164 *
-i No		Gen. Cond: Good / Fair / Poor / Burnt	
um Insured:	Excess:	Steering: Inorder / Jammed / Leaked / B	urnt or
(Client's Record)		Brake: Inforder / Jammed / Leaked / B	urnt or
lake of Veh:		Modi: Nil / S/Rim / STD A/Rim or	
		Tyre Size: F:	6 FC .
(Policy Condition)		R:	<u>v.</u>
Remark: The veh had	a commended no	BS / DUN / EXNOVA / GY /-FS / LIZA / N	NIC / OHTSU / PIR / SUMI /
repair at th	e time of inspection.		
Bal. or Market Value:		Front	Rear R/Bal. C mm
IDAC Accident Rport		R/Bal. mm	L/Bal. mm
GIA / PR Seen: _	Consistent?: Yes or No	D.O.A.	D.O.I. 14/3/22
Est. Repairs:	days Res.: Yes or No % 3 Val.: Yes or No	Survey held at A-teo	
Lum Sum:		Des. of Damages : Frt / Rear / O/S	NIS I UIC I Rooftop or
CA / REV / R	EP. / 24 HRS Vehicle: IN	/ OUT	
Date:	Person Contacted:	The U/C / Chassis frame / Bod	Structure affected due to collisio
Date / Time	Action / Instruction		· · · · · · · · · · · · · · · · · · ·
	lump sum \$4600, 6days	•	
<u></u>	Tamp cam v 1000, caaye	l	
	red:11,200;70%		
Date/Time, File Pass I	₪; Prell. Report	Days Of Repair:6	
1)	: Final Report	Resurvey No. of Trip:	Survey Fee:
Date/Time, File Retu		-11 -14	Transportation:
	A	dd Fee: : Site Insp (\$	)\$÷R\$\$I
2)			,\ I
. 2)		: Interview (\$; Tech. Invs (\$	) Photos