

(08/11/13)

REF:

CS6/AIS22002211/Kty3

ASS. REC. BY:

ASSIGNMENT

29/11/2016

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. **2022 22003876SL**Sum Insured: _____ Excess: **2900.00**

(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: **62000**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**Vehicle: **IN / OUT**

Date: _____ Person Contacted: _____

Veh No: **SLJ 1541D** Yr Regn: _____Type: **M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /**

Truck / Trailer or _____

Make: **Honda HRV 1.5** c.c **1496**Colour _____ A/C: **Insured / Std / NI / NA**Sp.Reading _____ T/Radio: **Insured / Std / NI / NA**

Eng/No: _____

C/No: **JHMRU1830GX * 201388**Gen. Cond: **Good / Fair / Poor / Burnt**Steering: **Inorder / Jammed / Leaked / Burnt** or _____Brake: **Inorder / Jammed / Leaked / Burnt** or _____Modi: **Nil / S/Rim / STD A/Rim** or _____Tyre Size: **F:** _____**R:** _____**BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /****TOYO / YOKO** or _____FrontRear

R/Bal. _____ mm R/Bal. _____ mm

L/Bal. _____ mm L/Bal. _____ mm

D.O.A. _____ D.O.I. _____

Survey held at _____

Des. of Damages: **Frnt / Rear / O/S / N/S / U/C / Rooftop** or**front**The **U/C / Chassis frame / Body Structure** affected due to collision.

Date / Time	Action / Instruction
	lump sum \$6100, 6days
	red: 3090.60;33%

Date/Time, File Pass to?

☐: **Preli. Report**Days Of Repair: **6**

1)

☐: **Final Report**

Resurvey No. of Trip: _____

Date/Time, File Return to?

2)

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

____ S + RS, ____ SI

Photos

Others

TOTAL

Report Format : _____

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