

CS/CTI22002958/Aqy3

Ass. Plo. BY:

REP:

## ASSIGNMENT

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. **SNM22D202070/C02**

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: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: **5** days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: **SKR6756M** Yr Regn: **2015, Feb.**Type **M.Car** / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: **Volkswagen Polo** c.c. **1197**Colour **Blue** A/C: Insured / Std / NI / NASp. Reading **98452** T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: **WVWZZZ6R2F4048467**Gen. Cond: **Good** / Fair / Poor / BurntSteering: **Inorder** / Jammed / Leaked / Burnt orBrake: **Inorder** / Jammed / Leaked / Burnt orModi: **Nil** / S/Rim / STD A/Rim orTyre Size: F: **185/60R15**R: **185/60R15**

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

TOYO / YOKO or **Hankook**

Front

Rear

R/Bal. **06** mm R/Bal. **06** mmL/Bal. **06** mm L/Bal. **06** mmD.O.A. \_\_\_\_\_ D.O.I. **30/03/22**Survey held at **KS**Des. of Damages: Frt **Rear** / O/S / N/S / U/C / Rooftop or

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

Date / Time

Action / Instruction

**TP Chiu****30/06/22@5.09pm revised to Jacqueline Tan by email.****LS \$5450, 5 days. (Red \$11433.46, 68%)****MV:****PV:****Nett:****1286**

Date/Time, File Pass to?

☐ : Preli. Report1) **30/06 Typist**☐ : Final Report

Date/Time, File Return to?

2) \_\_\_\_\_

Days Of Repair: **5**Resurvey No. of Trip: **1**

Survey Fee:

Transportation:

Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Insp (\$)☐ : S + RS, SI☐ : Photos☐ : Others

Report Format:

**MER-TP**

Form 200 / TP P. 10