

ASS. REG. BY: <u>Kenneth</u>		REF: <u>ASM / 220028891KV</u>
ASSIGNMENT		
From: _____ Date: _____	Veh No: <u>SUS 1991R</u> Yr Regn: <u>12, 18</u>	
Estimated Cost: _____	Type: <u>M. Car</u> / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /	
<u>OD / TP / WS / TP RES / OD RES / EVA / INV / MY</u>	Truck / Trailer or _____	
To Inspect Vehicle No: _____	Make: <u>Toyota</u> C.C. <u>1998</u>	
at Workshop m/s <u>Edwin</u>	Colour: <u>M. P. White</u> A/C: <u>Insured / Std / Nil / NA</u>	
of <u>5032 01-2PS</u>	Sp. Reading: <u>71119</u> T/Radio: <u>Insured / Std / Nil / NA</u>	
Insured: <u>SHD 4000H</u>	Eng/No: _____	
Policy No. <u>11451</u>	C/No: <u>JTEK B3 GH 70J004066</u>	
Claims No. <u>S2M03X70</u>	Gen. Cond: <u>Good</u> / Fair / Poor / Burnt	
Sum Insured: _____ Excess: _____	Steering: <u>In order</u> / Jammed / Leaked / Burnt or	
(Client's Record)	Brake: <u>In order</u> / Jammed / Leaked / Burnt or	
Make of Veh: _____	Modl: <u>Nil</u> / S/Rlm / STD A/Rlm or	
(Policy Condition)	Tyre Size: F: <u>235/55R18</u>	
Remark: The veh had commenced its repair at the time of inspection.	R: _____	
Bal. or Market Value: <u>\$128K</u>	<u>BS</u> / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /	
IDAC Accident Rpt: _____ Consistent?: Yes or No	TOYO / YOKO or	
GIA / PR Soon: _____ Consistent?: Yes or No	Front	Rear
Est. Repairs: <u>6-9</u> days Res.: Yes or No	R/Bal. <u>8</u> mm	R/Bal. <u>8</u> mm
Lum Sum: <u>20</u> % 3 Val.: Yes or No	L/Bal. <u>8</u> mm	L/Bal. <u>8</u> mm
CA / REV / REP. / 24 HRS	D.O.A. <u>29/3/22</u>	D.O.I. <u>31/3/2022</u>
Date: _____ Person Contacted: _____	Survey held at _____	
	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or	
	<u>BS</u>	
	The U/C / Chassis frame / Body Structure affected due to collision.	
Date / Time	Action / Instruction	
<u>1</u>	<u>Est not high</u>	
29/7/22	Final fig \$14,622.60 confirmed by email (Red 10,480.60, 41%)	
me, File Pass to? <input type="checkbox"/> Prell. Report		
me, File Return to? <input type="checkbox"/> Final Report		
29/7/22-typist		
Format: TP		
Sum / I.B.I: (\$ 14,622.60		
Days Of Repair: 10		
Resurvey No. of Trip: 2		
Survey Fee:		
Transportation		
\$ + RS \$		
Fuel		
Others		
TOTAL		
Add Fee: <input type="checkbox"/> Site Insp (\$		
<input type="checkbox"/> Interview (\$		
<input type="checkbox"/> Tech Invs (\$		
<input type="checkbox"/> Weekend (\$		