REC'D / FILED BY: GQ | REF: CS/SMR22003418/Gvy3

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s LEONG SENG MOTOR

of

Insured: SHB 888A

Policy No.

Claims No. TAX/04/22/2014

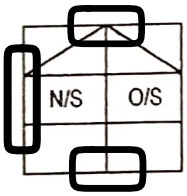
Sum Insured: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value: $13k

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 4 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: FBP3420T Yr Regn: 15 Mar/2019

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

Make: SUZUKI / UH200A c.c 200

Colour Grey A/C: Insured / Std / NI / NA

Sp.Reading 43346 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: MLCC91327K0406293

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: 110/90-13

R: 130/70-12

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	mm	L/Bal.	mm

D.O.A. 4/4/2022 D.O.I. 18-04-2022

Survey held at W/S 11:30

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
30/6/22	Guo Qiang informed LS $4800 (Red 5069.40, 51%)

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2) 30/6/22-typist

☐ : Preli. Report

☐ : Final Report

Days Of Repair: 4

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Invs ($)

☐ : Weekend ($)

Survey Fee:

Transportation:

S + RS. SI

Photos

Other:

TOTAL

Report Format : TP

Lump Sum / UPD : LS $4800