ASSIGNMENT    SNA 931P   Yi Regit: 3/5/11   Yi Regi	ASS. REC. BY: STOVE CS(AIS) 1003517/27   Eny3	
Type: (C2) M.Cycle   Bus   Van   Lorry   Taxi   Prime Mover   Type: (C2) M.Cycle   Bus   Van   Lorry   Taxi   Prime Mover   Truck   Trailer or Make: Audi   A   Colour   Get   AC: Insured   Std   Nil   NA   Insured:   English:   English:   Colour   Get   AC: Insured   Std   Nil   NA   Insured:   English:   English:   Colour   Get   AC: Insured   Std   Nil   NA   Insured:   English:   English:   Colour   Get   AC: Insured   Std   Nil   NA   Insured:   English:   English:   Colour   Get   AC: Insured   Std   Nil   NA   Insured:   English:   English:   English:   Colour   Get   AC: Insured   Std   Nil   NA   English:   English:   English:   English:   Colour   Get   AC: Insured   Std   Nil   NA   English:   First   Stanfing   Insured   Leaked   Burnt or   English:   English:   Stanfing   Insured   Insure	ASSIGNMENT	
Truck   Trailer or Make:   Authority   Aut	From: Date:	7 011 1101
To inspect Vehicle No: at Workshop m/s  of testered: Policy No. Claims No. Sum Insured: Policy No. Claims No. Sum Insured:  (Client's Record) Make of Veh:  (Consistent's 'Yes or No GIA / PR Sen':  Consistent's 'Yes or No Curren Sum:  (Consistent's 'Yes or No Curren Ribal.  (Cond. (Ribal') Instruction  (Consistent's 'Yes or No Curren Ribal.  (Cond. (Ribal') Instruction  (Cond. (Rib	~~	Type: N.Carl M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
colour Grey Nac.    Colour Grey Nac.   Colour Grey	OF TP WS ITP RES I OD RES I EVA I INV I MV	Truck / Trailer or
Sp. Reading	To Inspect Vehicle No:	Make: Audi A3 c.c 1498
Sp. Reading	at Workshop m/s	Colour GOOM A/C: Insured / Std / NI / NA
Eng/No:   Claims No.   Claims Record)   Claims Record)   Make of Vent:   Claims Record)   Make of Vent:   Claims Record)   Claims No.		Sp.Reading T/Radio: Insured / Std / NI / NA
Claims No.  Sum Insured:  (Clients Record)  Make of Veh:  (Potoy Condition)  Remark: The veh had commenced its repair at the time of inspection.  Bal. or Market Value:  IDAC Accident Root:  Consistent?: Yes or No  Est. Repeirs:  9 days Res.: Yes or No  Est. Repeirs:  9 days Res.: Yes or No  CA / REV / REP. / 24 HRS  Date:  Person Contacted:  Date / Time Action / Instruction  Da	Insured:	
Claims No.  Sum Insured:  (Clients Record)  Make of Veh:  (Potoy Condition)  Remark: The veh had commenced its repair at the time of inspection.  Bal. or Market Value:  IDAC Accident Root:  Consistent?: Yes or No  Est. Repeirs:  9 days Res.: Yes or No  Est. Repeirs:  9 days Res.: Yes or No  CA / REV / REP. / 24 HRS  Date:  Person Contacted:  Date / Time Action / Instruction  Da	Policy No.	C/NO: WAY22241X MA 101623
Citient's Record)   Make of Veh:   Brake: Inforce! Jammed / Leaked / Burnit or   Modi: Nil   Skipp'   STD A/Rim or   Tyre Size: F:   235/407/8     Prelix the time of inspection.   President Right   State of the pres	Claime No.	
Modi: Nil	Sum Insured: Excess:	Steering: Ihorder / Jammed / Leaked / Burnt or
(Policy Condition)  Remark: The veh had commenced its repair at the time of inspection.  Ball or Market Value:  IDAC Accident Rport:  Consistent?: Yes or No GIA / PR Seen:  Consistent?: Yes or No Lum Sum:  A 3 Val.: Yes or No  CA / REV / REP. / 24 HRS  Date:  Person Contacted:  Date / Time	(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
(Policy Condition)  Remark: The veh had commenced its repair at the time of inspection.  Ball or Market Value:  IDAC Accident Rport:  Consistent?: Yes or No GIA / PR Seen:  Consistent?: Yes or No Lum Sum:  A 3 Val.: Yes or No  CA / REV / REP. / 24 HRS  Date:  Person Contacted:  Date / Time	Make of Veh:	Modi: Nil / SRipp / STD A/Rim 97
Remark: The veh had commenced its repair at the time of finspection.   N/S O/S repair at the time of final finspection.   N/S O/S repair at the time of final finspection.   N/S O/S repair at the time of final finspection.   N/S O/S repair at the time of final finspection.   N/S O/S repair at the time of final finspection.   N/S O/S		Tyre Size: F: 235/40ZR/8
repair at the time of inspection.  Bal. or Market Value:  IDAC Accident Rport:  Consistent?: Yes or No  Est. Repairs:  GIA / PR Seen:  Consistent?: Yes or No  Lum Sum:  Action / Instruction  Date / Time   Action / Instruction  The U/C / Chassis frame / Body Structure affected due to collision.  Date / Time / Instruction / Inst	(Policy Condition)	
Bal. or Market Value:  IDAC Accident Rport  GIA / PR Seen:  Consistent? : Yes or No  Est. Repairs:  9 days Res.: Yes or No  Lum Sum:  9 value:  Vehicle: IN/OUT  Date:  Person Contacted:  Vehicle: IN/OUT  Date / Time   Action / Instruction  Dete / Time   Action / Instruction  Dete / Time   Action / Instruction  Oaler/Time, File Pess to?  (red, \$15,128.70, 48%)  Coaler/Time, File Pess to?  Days Of Repair:  9 days Res.: Yes or No  UBal. 5 mm UBal. 5 mm  D.O.I. 1944		BS / DUN / EXNOVA / GY / FS / LIZA (MIC) OHTSU / PIR / SUMI /
IDAC Accident Root: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: 9 days Res.: Yes or No Lum Sum: % 3 Val.: Yes or No CA / REV / REP. / 24 HRS  Date: Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision.  Date / Time   Action / Instruction	repair at the time of inspection.	TOYO / YOKO or
GIA / PR Seen: Consistent?: Yes or No Est. Repeirs: 9 days Res.: Yes or No Lum Sum: % 3 Val.: Yes or No  CA / REV / REP. / 24 HRS  Date: Person Contacted: Vehicle: IN / OUT  Date / Time	Bal. or Market Value:	Front Rear
Est. Repairs: 9 days Res.: Yes or No  Lum Sum: % 3 Val.: Yes or No  CA / REV / REP. / 24 HRS  Date: Person Contacted: Vehicle: IN / OUT  Date / Time   Action / Instruction   M   V   15 9    22/08   22/08/22 Steve informed final fig: \$16700.30 and 9 days  (red, \$15,128.70, 48%)  CalerTime, File Pass to?   : Prell. Report   Prell. Rep	IDAC Accident Rport: Consistent?: Yes or No	R/Bal. 5 mm , R/Bal. 5 mm
Lum Sum:  % 3 Val.: Yes or No  CA / REV / REP. / 24 HRS  Date: Person Contacted: Vehicle: IN/OUT  Date/Time Action / Instruction    Date/Time   Action / Instruction   Press to	GIA / PR Seen: Consistent? : Yes or No	L/Bal. 5 mm L/Bal. 5 mm
Date: Person Contacted: Vehicle: IN / OUT  Date / Time   Action / Instruction   Person Contacted:   The U/C / Chassis frame / Body Structure affected due to collision.    Date / Time   Action / Instruction   Person Contacted:   The U/C / Chassis frame / Body Structure affected due to collision.    Date / Time   Action / Instruction   Person Contacted:   The U/C / Chassis frame / Body Structure affected due to collision.    Date / Time   Action / Instruction   Person Contacted:   The U/C / Chassis frame / Body Structure affected due to collision.    Date / Time   Action / Instruction   Person Contacted:   Person Contact	Est. Repairs: 9 days Res.: Yes or No	
Date   Person Contacted:   The U/C / Chassis frame / Body Structure affected due to collision.	Lum Sum: % 3 Val.: Yes or No	Survey held at Temium
Date / Time   Action / Instruction		Des. of Damages : Frt Rear / O/S / N/S / U/C / Rooftop or
Date / Time   Action / Instruction		The U/C / Chassis frame / Body Structure affected due to collision.
Cred, \$15,128.70, 48%)   Date/Time, File Pass to?   Preli. Report   Days Of Repair: 9   1) 24/08/22   Final Report   Resurvey No. of Trip: 1   Survey Fee: Transportation:   Survey Fee:   Site Insp (\$	Date / Time   Action / Instruction	The cite i chassis halle i body chastare ancored due to comision.
Cred, \$15,128.70, 48%)   Date/Time, File Pass to?   Preli. Report   Days Of Repair: 9   1) 24/08/22   Final Report   Resurvey No. of Trip: 1   Survey Fee: Transportation:   Survey Fee:   Site Insp (\$	MV-159K.	
Cred, \$15,128.70, 48%)   Date/Time, File Pass to?   Preli. Report   Days Of Repair: 9   1) 24/08/22   Final Report   Resurvey No. of Trip: 1   Survey Fee: Transportation:   Survey Fee:   Site Insp (\$		
Date/Time, File Pass to?    Preli. Report   Days Of Repair: 9		
Date/Time, File Pass to?  : Preli. Report  Days Of Repair:  1 24/08/22  : Final Report  Resurvey No. of Trip:  Transportation:  2 Add Fee:  : Site Insp (\$ ) & +RS_SI  : Interview (\$ ) Photos  Report Forms:  Transportation:  Transportation:  : Tech, Invs (\$ ) Others	(red, \$15,128.70, 48%)	
24/08/22 : Final Report Resurvey No. of Trip: 1 Survey Fee:  Transportation:  2) Add Fee: : Site Insp (\$ )s + Rssi  : Interview (\$ ) Photos  Report Formsi: : Tech, Invs (\$ ) Others	· <del>X</del> · · ·	
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Date/Time, File Return to?	. 24/00/22	
2) Add Fee: :Site Insp (\$ )\$ +R\$\$!  :Interview (\$ ) Photos  :Tech, Invs (\$ ) Others		
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