

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. S2M03ZPB

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

Veh No: SMX 5156X Yr Regn: 15/5/17

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

Truck / Trailer or _____

Make: Volvo S60 c.c. 1498

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

Sp. Reading: 91654 T/Radio: Insured / Std / Nil / NA

Eng/No: _____

C/No: YVIFSA8CDH W 19538

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jaimmed / Leaked / Burnt or _____

Brake: In order / Jammed / Leaked / Burnt or _____

Modi: Nil / S/Rim / STD A/Rim or _____

Tyre Size: F: 245/40ZR18

R: 11

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: _____

DAC Accident Report: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

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

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

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

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

TOYO / YOKO or _____

Front	Rear
R/Bal. <u>5</u> mm	R/Bal. <u>5</u> mm
L/Bal. <u>5</u> mm	L/Bal. <u>5</u> mm
D.O.A. <u>26/4/22</u>	D.O.I. <u>29/4/22</u>

Survey held at MKG

Des. of Damages: FRONT RH / 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
	<u>MV-76K</u> Repair range <u>4k-5k</u> <u>4 days</u>
<u>06/05/22 @ 4.27pm</u>	<u>revised to Vale Oh via Smart Claims.</u>
<u>06/05/22</u>	<u>Submit PRS</u>

Date/Time, File Pass to? : Prel. Report

: Final Report

1) 06/05 Typist Date/Time, File Return to?

2) _____

Report Format: SMART CLAIMS - PRS

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

Days Of Repair: 4

Resurvey No. of Trip: _____

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech. Invs (\$ _____)

: Weekend (\$ _____)

Survey Fee: _____

Transportation: _____

S + RS. \$ _____

Photos _____

Others _____

TOTAL _____