

(08/11/13) wef

ASS. REC. BY: Marcus

REF: CC6/A1622004198/UP93

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: YQ 42776

at Workshop m/s 10's Bn

of

Insured: SM F 68M

Policy No. _____

Claims No. _____

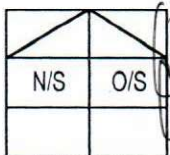
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value: \$155k

IDAC Accident Rpt: _____ Consistent?: Yes or No

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

Est. Repairs: 3 days Res.: Yes or No

Lum Sum: 1-3-1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

156N

Date: _____ Person Contacted: 274829238 Vehicle: IN / OUT

Veh No: YQ 42776 Yr Regn: 06/08/21

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

Truck / Trailer or

Make: Mit Fuso FK62 c.c 7545

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

Sp. Reading: 36816 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: FK62FM A40274

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: 245/70 R15.5

R: _____

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

TOYO / YOKO or

Front

R/Bal. 6 mm

L/Bal. 6 mm

D.O.A. 22/04/22

Survey held at _____

Rear

R/Bal. 6/6 mm

L/Bal. 6/6 mm

D.O.I. 6/5/22

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

O/S Pre.

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

Date / Time _____ Action / Instruction Dep 17

NO SG Cormort from 2021 model

11/5/22 PIP & 600 informed Susan.

Date/Time, File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee: ☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Invs (\$ _____)

☐ : Weekend (\$ _____)

) S + RS SI

) Photos

) Others

Report Format :

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

TOTAL