

CS/INC 22004289/LEVY3

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: **FBL 6289H**

Policy No. _____

Claims No. **MT/1169781-001**

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

N/S	O/S
	☒

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

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

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: **SMJ 4970S** Yr Regn: **8/3/19**Type: ☒ M. Car / ☐ M. Cycle / ☐ Bus / ☐ Van / ☐ Lorry / ☐ Taxi / ☐ Prime Mover /

Truck / Trailer or

Make: **Hyundai Avante** c.c. **1591**Colour: **White** A/C: ☒ Insured / ☐ Std / ☐ NI / ☐ NASp. Reading: **20236** T/Radio: ☒ Insured / ☐ Std / ☐ NI / ☐ NA

Eng/No: _____

C/No: **KMH D84/KMK 0866195**Gen. Cond: ☒ Good / ☐ Fair / ☐ Poor / ☐ BurntSteering: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt orBrake: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt orModl: **NI 15/Rim / STD A/Rim** orTyre Size: F: **195/65R15**R: **11**☒ BS / ☐ DUN / ☐ EXNOVA / ☐ GY / ☐ FS / ☐ LIZA / ☐ MIC / ☐ OHTSU / ☐ PIR / ☐ SUMI /

TOYO / YOKO or _____

Front

Rear

R/Bal. **5** mm R/Bal. **5** mmL/Bal. **5** mm L/Bal. **5** mmD.O.A. **22/4/22** D.O.I. **9/5/22**Survey held at **Wah Hong**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
	MV-75K
20/5/22	Steve informed LS \$3700 (red 2391.60, 39%)

Date/Time, File Pass to?

☐ : Prel. ReportDays Of Repair: **5**

1)

☐ : Final ReportResurvey No. of Trip: **2**

Date/Time, File Return to?

2) **20/5/22-typist**Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL

Report Format: **TP**Lump Sum / L.S. (\$ **\$3700**)