

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. _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

Veh No: PA 57224 Yr Regn: 24/10/05
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: ISUZU LT133P c.c. 8226
 Colour: M-111 - Green A/C: Insured / Std / NI / NA
 Sp. Reading: 907592 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: JALLT133P5700030
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or _____
 Brake: In order / Jammed / Leaked / Burnt or _____
 Modi: Nil / S/Rim / STD A/Rim or _____
 Tyre Size: F: 295/80R22.5
 R: " "

N/S	O/S

(Policy Condition)
 Remark: The veh had commenced its repair at the time of inspection.

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or _____
 Front R/Bal. 4 mm Rear R/Bal. 4 mm
 L/Bal. 4 mm U/Bal. 4 mm
 D.O.A. 9/5/92 connect 3 D.O.I. 10/5/92
 Survey held at _____
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
 Rear LH
 The U/C / Chassis frame / Body Structure affected due to collision.

Bal. or Market Value: _____
 IDAC Accident Rpt: _____ 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

Date / Time	Action / Instruction
4/7/03	submit Preli report (The vehicle has not send in for repair)
	final fig # 3235 and 4 days (Red, # 2150, 40%)

Date/Time, File Pass to? : Preli. Report
 : Final Report
 1) _____
 Date/Time, File Return to?
 2) _____
 Report Format: _____
 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 _____

CONNECT 3

566 Woodlands Road (Mandai Estate) Singapore 728697

Tel: (65) 9850-9666 Email: Connect3winnie@gmail.com

ROC:53360061L

GST:53360061L

QT22/PA5772Y/TPC

China Taiping Insurance (Singapore) Pte Ltd
3 Anson Rd #15-02
Springleaf Tower
Singapore 079909

QUOTATION

Dear Sir,

Cost of Repair to Vehicle PA5772Y

With reference to the above-mentioned, we are pleased to quote as follows:-

No.	DESCRIPTION	QTY	U/PRICE (S\$)	AMOUNT (S\$)
1.	Rear bumper (LH) - BR	1	1,750.00	1,750.00 1550
2.	Rear LH last compartment cover panel x R	1	1,550.00	1,550.00
3.	Rear LH last compartment cover outer lock / RT	1	185.00	185.00
4.	Labour charges	1	900.00	900.00 600
5.	Spray painting with designs	1	1,000.00	1,000.00 900
SUB-TOTAL				S\$5,385.00

- Price before 7% gst

Thank you.

Yours faithfully,


Winnie Chai
HP: 9850-9666

LRK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer
Signature:
Date:

Steve (LRK)

19/5/22, 19.20

W L
L/S
by M G
4 dy 5