

ASS. REC. BY:

REF:

CS/CTI 22004715/R43 Rny3

1906

ASSIGNMENT

Front:

Date:

Estimated Cost:

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

To Inspect Vehicle No: SNF 642A

at Workshop m/s JC AUTO

of 60, JLN Lam King #02-23/24

Insured:

CTI

Policy No.

Claims No.

Sum Insured:

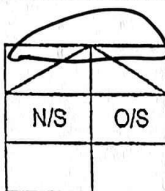
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

104K

IDAC Accident Report:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

6

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:

SNF 642A

Yr Regn:

2022 / APR

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

Truck / Trailer or

Make:

TOYOTA YARIS CROSS 1.5XB c.c. 1490

Colour:

BLUE

A/C:

Insured / Std / NI / NA

Sp. Reading

1577

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

MXPB103016645

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:

205/65R16

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

13/05/22

D.O.I.

19/05/22

Survey held at

JC AUTO

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

REPAIR LIMIT - 45K

lump sum: \$5750 and 6 days

(red: \$5979.97, 51%)

Date/Time, File Pass to?

☐

Preli. Report

1) 03/08/22

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair:

6

Resurvey No. of Trip:

2

Survey Fee:

Transportation:

\$ + RS. SI

Photos

Others

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Report Format:

tp-merimen

Lump Sum / L.B.K. (\$

5750