

ASS. REC. BY: Steve

REF:

CS/ASM/22000693/Egy 3PRS**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. S2M03RCO

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: 70K(est)

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

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SKN 2185H Yr Regn: 23/5/14Type: M.Cap / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: BMW X3 c.c. 1997Colour: Silver A/C: Insured / Std / NI / NASp. Reading: 173931 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WBAWX320900318693Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: NII / S/Rim / STD A/Rim orTyre Size: F: 245/50R18R: 1BS / DUN / EXNOVA / GR / FS / LIZA / MIC / OHTSU / PIR / SUMI /TOYO / YOKO or Pirelli

Front _____ Rear _____

R/Bal. 5 mm R/Bal. 5 mmL/Bal. 5 mm L/Bal. 5 mmD.O.A. 16/1/22 D.O.I. 19/1/22Survey held at Gold Autoworks

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

Front LH

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

Date / Time Action / Instruction

MP-10K

Estimate COR: \$6000-\$7000; 6 repair days

26/01/22@12.08pm revised to Kitty Teo via Smart Claims

26/01/22 Submit PRS

25/05/22 Submit LS \$9800, 6 days (Red \$1910, 16%)

Date/Time, File Pass to?

1) 25/05 Typist

Date/Time, File Return to?

2)

Report Format: TPLump Sum 11.2K (\$ 9800)☐ : Prel. Report☐ : Final ReportDays Of Repair: 6

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$ _____) \$ + RS \$ _____☐ : Interview (\$ _____) Photos☐ : Tech. Invs (\$ _____) Others☐ : Weekend (\$ _____) TOTAL

Survey Fee:

Transportation:

\$ + RS \$ _____

Photos

Others

TOTAL