ASS. REF: Taufik   REF: 03 | SMK2200514 0 | Tuys.

ASSIGNMENT

From: ______ Date: ______

Estimated Cost: ______

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

To Inspected Vehicle No: ______

at Workshop m/s ______

of ______

Insured: ______

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.

N/S	O/S

Bal. or Market Value: $200k.

IDAC Accident Rport: ______ 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 wp

Vehicle ... of

Date: ______ Person Contacted: ______

Veh No: SMS 8118 M   Yr Regn: 2017 Nov

Type: M.Car / M Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or ______

Make: BMW 740 LI   c.c 2998

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

Sp.Reading: 67068   T/Radio: Insured / Std / NI / NA

Eng/No: ______

C/No: WBA 7E22050G764357

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 / 45 R19

R: " "

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIRI / SUMI / TOYO / YOKO or Continental

Front			Rear		
R/Bal.	6	mm	R/Bal.	6	mm
L/Bal.	6	mm	L/Bal.	6	mm
D.O.A.			D.O.I.	31/5/22	

Survey held at: Detail lab.

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

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

Date / Time	Action / Instruction

Date/Time, File Pass to?

1) ______

Date/Time, File Return to?

2) ______

☐ : Preli. Report

☐ : Final Report

Days Of Repair: ______

Resurvey No. of Trip: ______

Add Fee: ☐ : Site Insp ($ ______)

☐ : Interview ($ ______)

☐ : Tech. Invs ($ ______)

☐ : Weekend ($ ______)

Survey Fee:	
Transportation:	
__S + RS.__SI	
Photos	
Others	

Report Format: ______

Lump Sum / I.B.I. (?