

ASS. REC. BY: TaujitREF: CSS / ASM 22005401 / Tyc

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. S2M043FX

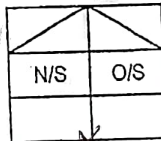
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

Bal. or Market Value: \$13K

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

Est. Repairs: 3 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS WP

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: FBT15DYr Regn: 2022, Jan

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

Truck / Trailer or

Make: Yamaha T155C.C. 155Colour: Grey

A/C: Insured / Std / NI / NA

Sp. Reading: _____

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: RLC461810my001326Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 90/80/R17R: 120/70R17BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal. 5 mmR/Bal. 5 mm

L/Bal. _____ mm

L/Bal. _____ mm

D.O.A. _____

D.O.I. 8/6/22 @ 115pmSurvey held at Advance Republic Motor.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 Range: \$1000 - \$2000, 3 days.

27/07/22 @ 5.45pm revised to Khor Saw Theng via Smart Claims.

27/07/22 Submit PRS.

Date/Time, File Pass to?

☐ : Prel. ReportDays Of Repair: 3

1) 27/07 Typist

☐ : Final Report

Resurvey No. of Trip: _____

Date/Time, File Return to?

2) _____

Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

S + RS. \$ _____

Photos

Others

TOTAL

Rep. Format: SMART CLAIMS - PRS

Lump Sum / L.B.L. (\$) _____