

REC BY: Tou Jia

REF: CS/CTI-22005640/Tay 3

**ASSIGNMENT**

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated cost: \_\_\_\_\_  
 OD / (P) VS / 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)

Veh No: SML4432T Yr Regn: 2019 May  
 Type: (M) Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or \_\_\_\_\_  
 Make: Honda Freed C.C. 149L  
 Colour: white A/C: Insured / Std / NI / NA  
 Sp. Reading: 170110 T/Radio: Insured / Std / NI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: GB 71078968  
 Gen. Cond: Good / Fair / Poor / Burnt  
 Steering: In order / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Brake: In order / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Mod: Nil / (S) Rim / STD A/Rim or \_\_\_\_\_  
 Tyre Size: F: 185/65R15  
 R: \_\_\_\_\_

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

*	
N/S	O/S

BS / (D) / EXNOVA / GY / FS / LIZA / MIC / DHTSU / PIR / SUMI /  
 TOYO / YOKO, or \_\_\_\_\_

Bal. or Market Value: \$102K.  
 IDAC Assurant Rpt: \_\_\_\_\_ Consistent? : Yes or No  
 GIA / PR Seant: \_\_\_\_\_ Consistent? : Yes or No  
 Est. Repairs: \_\_\_\_\_ days Res.: Yes or No  
 Turn Sumr: \_\_\_\_\_ % 3 Val.: Yes or No  
 CA / REV / REP. / 24 HRS  
 Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_  
 Vehicle: IN / OUT

Front Rear  
 R/Bal. 6 mm R/Bal. 6 mm  
 L/Bal. 6 mm L/Bal. 6 mm  
 D.O.A. \_\_\_\_\_ D.O.I. 15/6/22  
 Survey held at Bifrost  
 Des. of Damages: (R) Rear / O/S / N/S / U/C / Rooftop or \_\_\_\_\_  
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction

Date/Time, File Pass to?  : Prel. Report  
 : Final Report

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee:	
Transportation:	
\$ + RS. SI	
Photos	
Witness	

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

Date/Time, File Return to? \_\_\_\_\_  
 2) \_\_\_\_\_  
 Repair Form No: \_\_\_\_\_  
 Survey Form / I.E.R. (7)