

A.E.S. REC-3V: Tau

REF:

C33/CTI 22005794/Try3

ASSIGNMENT

From: _____ Date: _____

Estimated cost: _____

OD / TP / IS / 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)

Make of Veh: _____

(Policy Condition)

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

Bal. or Market Value: _____

IDAC Accident Report: _____ 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

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SLX 209XYr Regn: 2018 / Nepal

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

Truck / Trailer or

Make: Mazda 3c.c. 1796Colour: Grey

A/C: Insured / Std / NI / NA

Sp. Reading: 64823

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: Jm 6BN 22A 8-H01 66618Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: Nil / SP / STD A/Rim orTyre Size: F: 215/50R17R: 7 7

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

TOYO / YOKO or

Front

Rear

R/Bal. 6 mmR/Bal. 6 mmL/Bal. 6 mmL/Bal. 6 mm

D.O.A. _____

D.O.I. 17/6/22Survey held at Speedworkz

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

Repair Range: \$5000 - \$7000, 7 days

Date/Time, File Pass to?



Prel. Report

1)

Date/Time, File Return to?



Final Report

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐

Site Insp (\$



Interview (\$



Tech. invs (\$

Survey Fee: _____

Transportation: _____

S + RS \$

Photos

Others

Repair Formet: _____

1. Repairer Signature / Date / Time