ASS. REC. BY: STEVE _____ (S/M/S// UL 66/0/L-3)

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. _____

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 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   Vehicle: IN / OUT

Date: _____ Person Contacted: _____

	N/S	O/S

Veh No: SMQ 7134   Yr Regn: 29/10/19

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

Make: BMW 2161   c.c 1699

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

Sp. Reading: 16938   T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: WBAGV1003G5N9772

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modl: Nil / S/Rim / STD A/Rim or _____
205/55R17

Tyre Size: F: 205/55R17

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or   Pirelli

Front
R/Bal. 5 mm
L/Bal. 5 mm
D.O.A. 29/6/22

Rear
R/Bal. 5 mm
U/Bal. 5 mm
D.O.I. 22/7/22

Survey held at   Parkmore Motor

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

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

Date / Time	Action / Instruction
	MV-130K
16/11	Steve finalised final fig $12,437.95 ; 10 days with Cindy. (Red 5283.55, 292)

Days Of Repair: 10

Resurvey No. of Trip: _____

Date/Time, File Pass to?

[ ] : Prell. Report

[✓] : Final Report

Date/Time, File Return to?

1) _____

2) _____

Report Format: OD

Lump Sum / (D): ($ 12,437.95 _____)

Add Fee: [ ] : Site Insp ($ _____)
[ ] : Interview ($ _____)
[ ] : Tech. Invs ($ _____)
[ ] : Weekend ($ _____)

Survey Fee:
Transportation:
_S + RS._SI
Photos
Others

TOTAL