

ASS. REC. BY: Taujua

REF:

CS/CT122006702/T Y3

ASSIGNMENT

GE2023 Dec

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.

N/S	O/S

Bal. or Market Value:

814K

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

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

SMD1762C

Yr Regn:

20081 REC

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

Truck / Trailer or

Make:

Toyota Hilis

C.C.

1598

Colour

8/ner

A/C:

Insured / Std / NI / NA

Sp. Reading

126515

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

MK053 ZEE * 106124635

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

205 / 55R16

R:

7 4 -

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

TOYO / YOKO or

Nexen

Front

R/Bal.

6

mm

Rear

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

D.O.I.

18/7/2

Survey held at

JEW

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

Rear O/S

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

Date / Time

Action / Instruction

19/01/2023 Finalised LS \$4,700.00 ; 7 days with Ivie. Red \$11,096.84 ; 70%)

Date/Time, File Pass to?

☐

: Prell. Report

1)

☒

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: 7

Resurvey No. of Trip:

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

Report Format:

TP

Lump Sum: \$4,700.00