

A.C.S. REC-3Y: TuffinREF: C33/AL522007627Huy3

ASSIGNMENT

From: _____ Date: _____

Estimated cost: _____

OD / TP / VS / TP RES / OD RES / EVA / INV / MV

To Inspect/Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

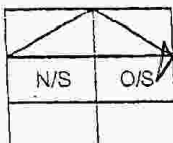
Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.Bal. or Market Value: 275K

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

WP - PLS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SMH 3998E Yr Regn: 2019 / JanType: Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Hyundai Nante C.C. 1591Colour: Grey A/C: Insured / Std / NI / NASp. Reading: 48738 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KMH D841CMK U844311Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 205/55R16R: 205/55R16

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

TOYO / YOKO or

Front R/Bal. 6 mmL/Bal. 6 mmD.O.A. _____ D.O.I. 24/8/22Survey held at Sheng U LanDes. 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: \$4000 - \$5000, 26 days

Date/Time, File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

S + RS \$ _____

Photos _____

Others _____

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

Rep. Form: _____

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

TOTAL