(08/11/13) wef

ASS. REC. BY: Marcus

REF: CS/FC1220078 77/Ucy3

ASSIGNMENT

From: Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: SMJ 262D

at Workshop m/s Convergence Automotive

of

Insured: SMB3535

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: $ 84k.

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 5 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS 755D Vehicle: IN / OUT

Date: Person Contacted: LTA $ 29862

Veh No: SMJ 262D Yr Regn: 20/02/19

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

Truck / Trailer or CA/

Make: Toyota Sienta c.c 1496

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

Sp.Reading 42905 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: MHFZ28H3400062360

Gen. 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: 185/60R15

R:

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

TOYO / YOKO or PREMIO

Front		Rear	
R/Bal.	7 mm	R/Bal.	7 mm
L/Bal.	7 mm	L/Bal.	7 mm
D.O.A.	15/08/22	D.O.I.	18/08/22

Survey held at

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

Rear

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

Date / Time	Action / Instruction
25/8/22	Req 11k. a/s $ 5300 informed Jeremy ; 5 days (Rcd $ 11,639.49 / 69%)

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2)

☐ : Preli. Report

☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Invs ($)

☐ : Weekend ($)

Report Format :

Lump Sum / I.B.I: ($)

7 x 15 = 90

Survey Fee:	170+90
Transportation:	50
___S + RS, ___SI	50+50
Photos OSP	73
Others 30/8/22	
TOTAL	498