

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: \$500.00
 (Client's Record)
 Make of Veh: _____

Veh No: YN9333K Yr Regn: 6/10/15
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: ISUZU NHR85 c.c. 2000
 Colour: Blue A/C: Insured / Std / NI / NA
 Sp. Reading N/A T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: JANHR85EP7100279
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or _____
 Brake: In order / Jammed / Leaked / Burnt or _____
 Modt: Nil / S/Rlm / STD A/Rlm or _____
 Tyre Size: F: 195/75R15
 R: "

(Policy Condition)
 Remark: The veh had commenced its repair at the time of inspection.

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
N/S	O/S

Bal. or Market Value: _____
 IDAC Accident Rpt: _____ 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

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or _____
 Front Rear
 R/Bal. 4 mm R/Bal. 4 mm
 L/Bal. 4 mm L/Bal. 4 mm
 D.O.A. 22/8/22 D.O.I. 31/8/22
 Survey held at City Auto
 Des. of Damages: Front / Rear / N/S / UIC / Rooftop or
 The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>MV-30K</u>
	<u>PR-1616</u>
	<u>NV-28,384</u>
<u>07.11.2022</u>	<u>Steve finalised LS \$12,200.00 ; 14 days with repairer.</u>
	<u>(Red \$22,061.50 ; 64%)</u>

Date/Time, File Pass to? : Prell. Report
 : Final Report
 Date/Time, File Return to?
 2)
 Repair Format: OD
Lump Sum / L.S.: (\$ \$12,200.00)

Days Of Repair: 14
 Resurvey No. of Trip: _____
 Add Fee: : Site Insp (\$ _____)
 : Interview (\$ _____)
 : Tech. Invs (\$ _____)
 : Weekend (\$ _____)

Survey Fee:	_____
Transportation:	_____
\$ + RS. \$I	_____
Photos	_____
Others	_____
TOTAL	_____