

ASS. REC. BY:

REF: CT1 / CS/CTI22008771/Kvy3Kenneth

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MY

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

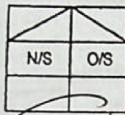
Insured: SMF 7460ZPolicy No. DMPCSNA00207942101Claims No. SNM22D206284/C02/LEWLC

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 Report: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 05 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SKZ 8420BYr Regn: 02, 16

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

Truck / Trailer or

Make: Hondac.c. 1898Colour: M. Maroon

A/C: Insured / Std / NI / NA

Sp. Reading: 178985

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: R411109192

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modl: Nil / S/Rlm / STD / Rlm or

Tyre Size: F: 215/60R17

R: _____

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

TOYO / YOKO or

Front

Rear

R/Bal. P mmR/Bal. P mmL/Bal. P mmL/Bal. P mmD.O.A. 2/9/22D.O.I. 6/9/2022

Survey held at _____

Des. 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

1 Will send GIA & CH over22/9/22 Kenneth informed LS \$3650 (Red 8560, 70%)

Time, File Pass to?

☐

: Prel. Report

☐

: Final Report

Time, File Return to?

22/9/22-typistDays Of Repair: 5Resurvey No. of Trip: 1

Survey Fee:

Transportation:

\$ - RS. SI

Fees

Others

TOTAL

ort Format: Merimen

Sum / I.B.I: (\$ LS \$3650)

Add Fee:

☐

: Site Insp (\$)

☐

: Interview (\$)

☐

: Tech Invs (\$)

☐

: Weekend (\$)

\$ 85.80 \$ 171.60 X