

ASS REC BY: Steve

CS/SMR 120090.33/Eny 3

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: \_\_\_\_\_  
(Client's Record)  
Make of Veh: \_\_\_\_\_

Veh No: SM6 6821S Yr Regn: 28/11/18  
Type: M/Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
Truck / Trailer or  
Make: Honda Odyssey c.c. 2356  
Colour: Black A/C: Insured / Std / Nil / NA  
Sp. Reading: 55610 T/Radio: Insured / Std / Nil / NA  
Eng/No: \_\_\_\_\_  
C/No: JHMRC1880JC102803  
Gen. Cond: Good / Fair / Poor / Burnt  
Steering: In order / Jammed / Leaked / Burnt or  
Brake: In order / Jammed / Leaked / Burnt or  
Mod: Nil / S/Rim / STD A/Rim or  
Tyre Size: F: 215/55R17  
R: 17  
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or Michelin Veyro  
Front Rear  
R/Bal. 4 mm R/Bal. 4 mm  
L/Bal. 4 mm L/Bal. 4 mm  
D.O.A. 22/11/22 D.O.I. 5/10/22  
Survey held at Koh Meter  
Des. of Damages: Frt / Rear / Q/S / N/S / UIC / Rooftop or  
Front LH  
The UIC / Chassis frame / Body Structure affected due to collision.

(Policy Condition)  
Remark: The veh had commenced its repair at the time of inspection.  
Bal. or Market Value: \_\_\_\_\_  
IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No  
GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No  
Est. Repairs: 5 days Res.: Yes or No  
Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No  
CA / REV / REP. / 24 HRS  
Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_  
Vehicle: IN / OUT

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

Date / Time	Action / Instruction
	<u>MR-135K</u>
	<u>Steve confirmed final fig :\$6534.25 and 5 days</u>
	<u>(red,9102.16, 58%)</u>

Date/Time, File Pass to? ☐ : Prel. Report  
1) 10/10/22 ☐ : Final Report

Days Of Repair: 5  
Resurvey No. of Trip: 1

Date/Time, File Return to?  
2) \_\_\_\_\_  
Report Format: \_\_\_\_\_  
Lump Sum / L.B.: 6534.25

Add Fee: ☐ : Site Insp (\$ \_\_\_\_\_)  
☐ : Interview (\$ \_\_\_\_\_)  
☐ : Tech. Invs (\$ \_\_\_\_\_)  
☐ : Weekend (\$ \_\_\_\_\_)

Survey Fee:	
Transportation:	
\$ + R.S. \$	
Photos	
Others	
TOTAL	