

ASS. FILED BY: _____

REF: _____

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: Smy8634H Yr Regn: 2010, Oct
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: Lexus / IS250 c.c. 2500
 Colour: Black A/C: Insured / Std / NI / NA
 Sp. Reading: 107481 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: JTHFK252702514716
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or _____
 Brake: Inorder / Jammed / Leaked / Burnt or _____
 Mod: Nil / S/Rim / STD A/Rim or _____
 Tyre Size: F: 225/60 R18
 R: 225/60 R18

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

N/S	O/S

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or _____
 Front 06 mm R/Bal. 06 mm
 L/Bal. 06 mm Rear 06 mm
 D.O.A. _____ D.O.I. 27/09/22
 *Survey held at twinkl
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or _____
 The U/C / Chassis frame / Body Structure affected due to collision.

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

Date / Time	Action / Instruction
	<u>TP Chinn.</u> <u>COE Expiry: 30/09/2030</u>
21/10/2022	Finalised L/S \$1,300.00 @ 02 days (Red \$3,635.15 /74%)
	MV :
	PV :
	Nett :

Date/Time, File Pass to? : Preli. Report
 : Final Report
 Date/Time, File Return to?

Days Of Repair: _____
 Resurvey No. of Trip: _____

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

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

Report Format: _____