

ASS. REC. BY: Touy M

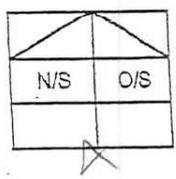
REF: CS/ EQ/ 22009750/ Twy 3.

ASSIGNMENT

From: _____ Date: _____
Estimated Cost: _____
OD / TP / IS / 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: SHB62535 Yr Regn: 2018 July
Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or _____
Make: Hyundai Coniq C.C. 1580
Colour: Blue A/C: Insured / Std / NI / NA
Sp. Reading: 437421 T/Radio: Insured / Std / NI / NA
Eng/No: _____
C/No: KMHCC51CVJ4103381
Gen. Cond: Good / Fair / Poor / Burnt
Steering: In order / Jammed / Leaked / Burnt or _____
Brake: In order / Jammed / Leaked / Burnt or _____
Modi: Nil / S/Rim / STD A/Rim or _____
Tyre Size: F: 195/65R15
R: 195/65R15

(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: _____ days Res.: Yes or No
Lum Sum: _____ % 3 Val.: Yes or No
CA / REV / REP. / 24 HRS
Date: _____ Person Contacted: Ms Luke Vehicle: IN / OUT

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or westlake
Front Rear
R/Bal. 6 mm R/Bal. 6 mm
L/Bal. 6 mm L/Bal. 6 mm
D.O.A. _____ D.O.I. 04/10/22
Survey held at Comfort Logy
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
27/12/2022	Finalise L/S \$1,100.00 @ 2 DAYS (RED \$1,315.56/54%)

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

1) _____
Date/Time, File Return to?
2) _____

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

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

Survey Fee:	_____
Transportation:	_____
S + RS. Sl.	_____
Photos	_____
Others	_____

Rep. Format : _____
Lump Sum / I.B.R. / P. _____