

ASSIGNMENT

From: Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: SMG 2057H
at Workshop m/s MS CAR AUTO

of YN 3835K

Insured:

Policy No.

Claims No

Sum Insured: (Client's Record)

Excess:

Make of Veh:

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

N/S	O/S

Bal. or Market Value: \$92k

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 30 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: Person Contacted: C 444W
Vehicle: IN / OUT

Veh No: SMG 2057H Yr Regn: 10/12/18

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

Truck / Trailer or

Make: Toyota CHR Hybrid c.c 1797

Colour: Black A/C: Insured / Std / NI / NA

Sp. Reading: 33870 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: 21X10 2126763

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 215/60R17 Davanti

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

TOYO / YOKO or Kapsen

Front R/Bal. 6 mm Rear R/Bal. 6 mm

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. 29/09/22 D.O.I. 10/10/22

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

O/S Lm.
The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
LTA # 38914	Dep 14/2
L/S # 3200	CRed # 4469, 5812
Buyer 545110	had by 1927

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

1) Date/Time, File Return to?

2)

Days Of Repair: 3
Resurvey No. of Trip: 2

Survey Fee:	
Transportation:	
_____ S + RS _____ SI	
) Photos	
) Others	
TOTAL	

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

Report Format : MFBTP
Lump Sum / I.B.I. (\$) 3200

MS Car Auto Pte Ltd

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Tel: 6385-1838 / 9725 4442 Fax: 6386-1838 Email: motorstopoffice@gmail.com / motorstopservices@gmail.com / msgroupoffice@gmail.com

SJE : _____

Vehicle Nos : SMG2057H

Date of Survey : _____

Model : TOYOTA CH-R

Contacts : _____

Year : _____

** AGREED COB and Days with S/E **

Amount : _____

Nos.	PARTS	QTY	UNIT S\$	Total S\$	REMARKS IF ANY
FRONT PORTION ONLY					
1	FRONT HEADLAMP RH <i>sc/om</i>	1	\$ 1,727.00	\$ 1,727.00	/
2	FRONT FENDER RH <i>rs/syf</i>	1	\$ 826.00	\$ 826.00	/ 645.10
3	FRONT FENDER GANISH RH <i>groz/b</i>	1	\$ 143.00	\$ 143.00	/
4	FRONT FENDER HYBRID EMBLEM RH <i>na</i>	2	\$ 75.00	\$ 150.00	/ 176.75
5	FRONT FENDER SHIELD RH <i>na</i>	1	\$ 236.00	\$ 236.00	/ 182.10
6	FRONT BUMPER <i>cut</i>	1	\$ 495.00	\$ 495.00	/
7	FONNT BUMPER SIDE GARNSIH RH <i>na</i>	1	\$ 159.00	\$ 159.00	X
8	FRONT BUMPER LOWER DIFFUSER <i>be/om</i>	1	\$ 505.00	\$ 505.00	/
9	FRONT BUMPER RETAINER RH <i>cut</i>	1	\$ 115.00	\$ 115.00	/ 62.50
10	WASHER TANK <i>na</i>	1	\$ 189.00	\$ 189.00	/
11	WASHER TANK NECK <i>na</i>	1	\$ 97.00	\$ 97.00	/
12	FRONT DOOR RH <i>na</i>	1	\$ 1,350.00	\$ 1,350.00	X
				Total Price	\$ 5,992.00
				Less 25%	\$ 1,498.00
				Sub Total Price	\$ 4,494.00

Nos.	PARTS	QTY	UNIT S\$	Total S\$	REMARKS IF ANY
FRONT PORTION ONLY					
1	FRONT NO. PLATE SET <i>na</i>	1	\$ 65.00	\$ 65.00	X
2	FRONT BUMPER CLIPS SET <i>na</i>	1	\$ 80.00	\$ 80.00	30
3	FRONT FENDER SHIELD CLIPS SET <i>na</i>	1	\$ 60.00	\$ 60.00	30
				Total	\$ 205.00

Nos.	Claims Details : Labour and Spray Painting	Total S\$	REMARKS IF ANY
FRONT PORTION ONLY			
1	Labour to panel beat/cut/weld affected panels, realign and refit/replace necessary affected parts	\$ 1,400.00	420
2	To putty and spray paint on accident affected portion	\$ 1,000.00	600
3	To disconnect/reconnect and check for proper wiring and electrical function	\$ 100.00	20
4	To apply anti rust coating	\$ 120.00	30
5	To dismantle and replaced front under carriage Rh	\$ 350.00	X
		Total	\$ 2,970.00

*not allowed
na
10/10/22
2/5 \$ 3200
3 days
Adopt to repair*

NAME OF SURVEYOR :

REMARKS :

PARTS TOTAL \$ 4,699.00
LABOUR TOTAL \$ 2,970.00
OVERALL TOTAL \$ 7,669.00

- To resurvey before final spray painting
- To display damaged parts during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer
Signature:
Date:

*P-38347
252
2876.02
60
1070
4006.02
22
3204*