ASS. Rec. By: GQ REF: AIG CC3/AIG22010446/Gnc

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s PREMIUM AUTO

of

Insured:

Policy No.

Claims No.

Sum Insured: Excess: 1000

(Client's Record)

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: $288k

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 3 days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA REV REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SNF8122G Yr Regn: 23 Jun/2022

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

Make: AUDI / Q5 2.0 c.c 1984

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

Sp.Reading 3230 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: WAUZZZFY6M2089465 *

Gen. Cond: Good / Fair / Poor / Burnt

Steering: norder / Jammed / Leaked / Burnt or

Brake: norder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 235/60R18

R: //

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.		D.O.I.	20-10-2022

Survey held at W/S 2:30PM

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

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

Date / Time	Action / Instruction
	Yes/No BI Involved
	Confirm final fig $4,976.00 before excess $1,000.00 & GST and 3 repair days. (red, $18567,79%)

Date/Time, File Pass to?

1) 24/03/23

Date/Time, File Return to?

2)

☐ : Preli. Report

☐ : Final Report

Days Of Repair: 3

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Insp ($)

☐ : Weekend ($)

Survey Fee:

Transportation: ___S + RS.___SI

Photos

Others

TOTAL

Report Format: od

Lump Sum / UP to: 4976