ASS. REC BY: REF: CC3/AIG22011212/AWC

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: $600

(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: 76K

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 5 days Res.: Yes or No

Lum Sum: I.B.I % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SLR 3043U. Yr Regn: 2017, August.

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

Make: Audi A3. C.C 999

Colour: White. A/C: Insured / Std / Nil / NA

Sp.Reading: 118852 T/Radio: Insured / Std / Nil / NA

Eng/No:

C/No: WAUZZZ8V6J1003544

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: 205/55R16

R: 205/55R16

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

Front		Rear	
R/Bal.	06 mm	R/Bal.	06 mm
L/Bal.	06 mm	L/Bal.	06 mm
D.O.A.		D.O.I.	08/11/22

Survey held at: Premier.

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
	OD AIG
28/02/2023	Confirm final fig $10,094.64 before excess $600.00 & GST @ 05 repair days.
	(Red $11,036.36/52%)
	MV : 76K
	PV : 31.7K
	Nett : 44.3K

Date/Time, File Pass to?

28/02/2023

1) TYPIST

[ ] : Preli. Report

[✓] : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 05

Resurvey No. of Trip:

Add Fee: [ ] : Site Insp ($)

[ ] : Interview ($)

[ ] : Tech. Invs ($)

[ ] : Weekend ($)

Survey Fee:

Transportation:

S + RS. SI.

Photos

Others

TOTAL

Report Format : OD

Lump Sum / I.B.I (P/P $10,094.64)