(08/11/13) wef

ASS. REC. BY: April

REF: CS/LPC 22007925/Rcy3

653m

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No: SG5062B

at Workshop m/s SBST

of 3, 410 CHUKANG CRESCENT RD

Insured: LPC

Policy No.

Claims No.

Sum Insured: Excess:

(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:

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: SG5062B Yr Regn: 2016 / MAR

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

Make: VOLVO B9TL 9.4L AUTO c.c 9364

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

Sp.Reading 330924 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: YV3S4P923GA176864

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: 275/70R22.5

R: "

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

Front		Rear	
R/Bal.	8 mm	R/Bal.	8/8 mm
L/Bal.	8 mm	L/Bal.	8/8 mm
D.O.A.	05/08/22	D.O.I.	18/08/22

Survey held at SBST

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

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

Date / Time	Action / Instruction
3/10	Submit final fig $1656.00; 3 days. (Red. 188+, 10%) (Repair cost not conclude) No GIA

Date/Time, File Pass to?

1) ☐ : Prell. Report

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 3

Resurvey No. of Trip:

Survey Fee:

Transportation: S + RS, SI

Photos

Others

TOTAL

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Invs ($)

☐ : Weekend ($)

Report Format : TP

Lump Sum / I.B.I: ($ 1656.00)