REC'D / FILE BY: GQ | REF: CS/ASM22009504/Gvy3

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s AB ENGINEERING

of

Insured: SHD 7130X

Policy No.

Claims No. S2M04BOV

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: $142k

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 4 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: SMZ9699J Yr Regn: 01 Sep/2016

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

Make: TOYOTA LEXUS RX350 c.c 3456

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

Sp.Reading 100187 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: JTJBZMCA802011436 *

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: 235/55R20

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. 26/9/2022 D.O.I. 27-09-2022

Survey held at W/S 4:30PM

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
2/11/22	Guo Qiang informed final fig $11,661.42 (Red 8624.95, 42%

Date/Time, File Pass to? 1)

Date/Time, File Return to? 2) 2/11/22-typist

☐ : Preli. Report

☐ : Final Report

Days Of Repair: 4

Resurvey No. of Trip: 2

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Invs ($)

☐ : Weekend ($)

Report Format: TP

Lump Sum / UPD: $11,661.42

Survey Fee:

Transportation: S + RS. SI

Photos

Other:

TOTAL