

Steve

CS3/SMR 27008602/E9931

ASSIGNMENT

From:

PRS

Date:

Veh No:

ERN 17E

Yr Regn:

14/8/14

Estimated Cost:

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

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

Truck / Trailer or

To Inspect Vehicle No:

Make:

Kymco

K-XCT 2001

c.c.

145/199

at Workshop m/s

Colour:

Blue

A/C: Insured / Std / NI / NA

Insured:

Sp. Reading

7809

T/Radio: Insured / Std / NI / NA

Policy No.

Eng/No:

Claims No.

C/No:

Sum Insured:

Excess:

Gen. Cond: Good / Fair / Poor / Burnt

(Client's Record)

Steering: In order / Jammed / Leaked / Burnt or

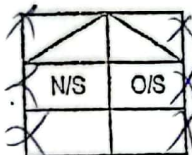
Make of Veh:

Brake: In order / Jammed / Leaked / Burnt or

(Policy Condition)

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

Remark: The veh had commenced its repair at the time of inspection.



Tyre Size:

F:

170/70-14

R:

140/70-14

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

TOYO / YOKO or .

Bal. or Market Value:

Front

Rear

IDAC Accident Report:

Consistent? : Yes or No

R/Bal.

4

mm

R/Bal.

4

mm

GIA / PR Seen:

Consistent? : Yes or No

L/Bal.

mm

L/Bal.

mm

Est. Repairs:

4

days

Res.: Yes or No

D.O.A.

18/8/22

D.O.I.

7/9/22

Lum Sum:

%

3 Val.: Yes or No

Survey held at

Hua Chin

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

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

Date / Time

Action / Instruction

MV-5X

ESTIMATE RANGE OF COR \$3000-\$4000.

29/11/22 Submit LS \$3300. 4 days (Red \$1800, 35%)

Date/Time, File Pass to?



: Prel. Report

Days Of Repair:

4

1) 29/11 Typist



: Final Report

Resurvey No. of Trip:

Date/Time, File Return to?

2)

Add Fee:



: Site Insp (\$



: Interview (\$



: Tech. Invs (\$



: Weekend (\$

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL

Report Format:

TP

Lump Sum \$3300