

(08/11/13) Weir

ASS. REC. BY: WmREF: CS/LIP 22012043/Rug3

417K

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: SMB 3033Xat Workshop m/s TOWER TRANSIT P/Lof 21, Bulim DrInsured: LIP

Policy No. _____

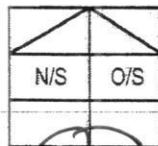
Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.Bal. or Market Value: NA

IDAC Accident Rpt: _____ Consistent?: Yes or No

GIA / PR Seen: _____ Consistent?: Yes or No

Est. Repairs: 4 days Res.: Yes or NoLum Sum: 1.6.1 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Date / Time Action / Instruction

Veh No: SMB 3033X Yr Regn: 2013 FEB

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

Truck / Trailer or

Make: MAN NL320F CA227 c.c. 10518Colour: GREEN A/C: Insured / Std / NI / NASp. Reading: 571786 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WMAA 2222 267001573Gen. Cond: Good / Fair / Poor / BurntSteering: In order / Jammed / Leaked / Burnt orBrake: In order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 275/70R22.5R: 8/9BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

R/Bal. 8 mmL/Bal. 8 mmD.O.A. 29/11/22

Survey held at

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

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

19/05/2023 Finalise P/P \$3,943.18 @ 4 days (Red \$1,950/337.)

Date/Time, File Pass to?

19/05/20231) Typist

Date/Time, File Return to?

2) _____

☐ : Prefl. Report☒ : Final ReportDays Of Repair: 4

Resurvey No. of Trip: _____

Survey Fee:

Transportation:

S + RS SI

Photos

Others

TOTAL

Report Format: TPLump Sum / I.B.I. (\$) P/P \$3,943.18Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invs (\$)☐ : Weekend (\$)