ASS. REC. BY: Marcus   REF: CS/ MSG 22012384/Umy3

ASSIGNMENT

From: **Date:**

Estimated Cost:

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

To Inspect Vehicle No: SML 6902R

at Workshop m/s   Quan Re

of

Insured: SMF28494

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: $90k.

IDAC Accident Rport: Consistent? : **Yes** or **No**

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

Est. Repairs: 3   days   Res.: **Yes** or **No**

Lum Sum: 20   %   3 Val.: **Yes** or **No**

CA / REV / REP. / 24 HRS

Date: Person Contacted: LMF34343

Vehicle: **IN / OUT**

Veh No: **SML 6902R**   Yr Regn: 30/05/19

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

Make: Honda shuttle Hybrid   c.c 1496

Colour: Shel   A/C: **Insured** / Std / NI / NA

Sp.Reading 122910   T/Radio: **Insured** / Std / NI / NA

Eng/No:

C/No: GP72001400

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: 185/60R15   R:

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A. 08/11/22		D.O.I. 12/12/22	

Survey held at

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

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

Date / Time   Action / Instruction   Rep 13k.

ful buyer PS, heodlay 2235 Fender 545.20 mavshield 182.

L/S $3600 (Red. $3371.36, 48%)

28/12/22 informed Jennifer lump sum: $3600 and 3 days

Date/Time, File **Pass** to?   ☐ : Preli. Report

1)   ☐ : Final Report

Date/Time, File **Return** to?

2)

Days Of Repair: 3

Resurvey No. of Trip: 2

Add Fee: ☐ : Site Insp ($
    ☐ : Interview ($
    ☐ : Tech. Invs ($
    ☐ : Weekend ($

Survey Fee:

Transportation:
)___S + RS,___SI
) Photos
) Others

Report Format :   TP

Lump Sum / I.B.I: ($ 3600   )

TOTAL