

ASS. REC. BY: NAZ

REF:

NS/ ENC 22012453/Nvp3

Ju LJ

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: SMP 3041Z

Policy No. _____

Claims No. MT/1201094-002

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

<input type="checkbox"/>	<input type="checkbox"/>
N/S	O/S
<input type="checkbox"/>	<input type="checkbox"/>

Bal. or Market Value: _____

IDAC Accident Rpt: _____ 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

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SHA 8258 X Yr Regn: 18 OCT 2018

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

Truck / Traller or _____

Make: HYUNDAI IONIQ G2 c.c. 1,580

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

Sp. Reading: 553 637 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KMHC 851CVK114863

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammod / Leaked / Burnt or _____

Brake: Inorder / Jammed / Leaked / Burnt or _____

Modl: Nil / S/Rim / STD / R/Arim or _____

Tyre Size: F: 195/65 R15

R: 11

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

TOYO / YOKO or WESTLAKE

Front _____ Rear _____

R/Bal. 5 mm R/Bal. 4 mm

L/Bal. 5 mm L/Bal. 4 mm

D.O.A. 12/12/2022 D.O.I. 12/12/2022

Survey held at CDGE LOYANG

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

O/S REAR

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
16/12/22	Naz informed LS \$4600 (Red 1950.20, 29%)

ENC 1/5

Date/Time, File Pass 10? : Preli. Report

1) : Final Report

Date/Time, File Return 10?

2) 19/12/22-typist

Days Of Repair: 3

Resurvey No. of Trip: 1

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech. Invs (\$ _____)

: Weekend (\$ _____)

Survey Fee:

Transportation:

____ \$ + RS ____ \$

Photos

Others

TOTAL

Report Format : TP

Lump Sum / H.B.: (\$ 4600)