

ASS. REC BY: Tau Lin

REF: CC6/AG 22 012537/Tp95

ASSIGNMENT

From: _____ Date: _____

Estimated cost: _____

OD / TP / NS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

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.

N/S	O/S

Bal. or Market Value: 81/8K

IDAC Accident Report _____ Consistent? : Yes or No

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

Est. Repairs: _____ 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: SMP 8772P Yr Regn: 2019, Oct

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

Truck / Trailer or

Make: Toyota Prius C.C. 1798

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

Sp. Reading: 156680 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: JTDZS3EU708051901

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 205/60R16

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. _____ D.O.L. 15/12/22

Survey held at Tau Lin

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

N/S Rear

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

Date/Time Action/Instruction

Date/Time, File Pass to?

: Preli. Report

Days Of Repair: _____

1) Date/Time, File Return to?

: Final Report

Resurvey No. of Trip: _____

Survey Fee:

2) _____

Add Fee: : Site Insp (\$ _____)

Transportation:

: Interview (\$ _____)

Photos

: Tech. Invs (\$ _____)

Others

Rep. Formet: _____