ASS, PEC.BY: REF:			
	ASSIGNM	THE SHARE	
From: Date:	Veh No	sLv6082	R. Yr Regn: 2018 / Jan.
Estimated Cost:	Type	M.Car / M.Cycle / Bus / Van / L	orry / Taxi / Prime Mover /
DD / TP / WS / TP RES / OD RES / EVA / INV / MV		Truck / Trailer or	
o Inspect Vehicle No:	Make:	Hundai \$	Elaston. c.c 1591
at Workshop m/s	Colour	Grey.	A/C: Insured / Std / NI / NA
of	Sp.Re	ading – /	T/Radio: Insured / Std / NI / NA
nsured:	Eng/N		_
Policy No.	C/No:	KMH 284	11CM JU610400
Claims No.		Cond: @ood/ Fair / Poor / Bur	nt
Sum Insured: Excess:	Steeri	ng: Inorder / Jammed / Leake	d / Burnt or
(Client's Record)	Brake	inorder / Jammed / Leake	d / Burnt or
Make of Veh:		Modi: Nil / S/Rim / STD A/Rim or	
	Tyre S		165 R15
(Policy Condition)		R: 183	165 RIS .
Remark: The veh had commenced its N/S O/S		BS / DÚN / EXNOVA / GY / FS / LIZA /MIC/ OHTSU / PIR / SUMI /	
repair at the time of inspection.	ТОҮ	O/YOKO or	
Bal. or Market Value:	Front		Rear
IDAC Accident Rport: Consistent? : Yes or No		06mm	R/Balmm
GIA / PR Seen: Consistent?: Yes or No		26mm	L/Bal mm
Est. Repairs: days Res.: Ye	s or No D.O.A	ł	D.O.I. 10/01/23.
Lum Sum: % 3 Val.: Ye	s or No Surve	ey held at	tomobile Halb/
CA / REV / REP. / 24 HRS	Des.	of Damages : Frt / Rear O	S N/S U/C Rooftop or
	Vehicle: IN / OUT		
Date:Person Contacted:	Th	e U/C / Chassis frame / B	ody Structure affected due to collision
Date / Time Action / Instruction		•	
Clin		· · ·	
			*
m < :			
PY:			
Nett:			
			954J.
Date/Time, File Pass to? : Preli. Report	Days	Of Repair:	
1) : Final Report		rvey No. of Trip:	Survey Fee:
Date/Time, File Return to?	(Commence)	70	Transportation:
2)	Add Fee:	: Site Insp (\$)8 ÷ RSSI
	1	f: Interview (\$) Photos
Report Former:		: Tech. Invo (2) Others

Boundary France F & For La 7th