A&E Rec'd By: | REF: CS/FCI23000079/Avy3m4

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: SBS 6545G

Policy No. _____

Claims No. D23000067MFBP

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: _____

IDAC Accident Rport: _____ 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: SKM9179K Yr Regn: 2014, Apr

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

Make: Mercedes Benz C180 c.c 1595

Colour White. A/C: Insured / Std / NI / NA

Sp.Reading 145485. T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WDD2040312A928145.

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: 225/45R17.

R: 225/45R17.

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

Front		Rear	
R/Bal.	06 mm	R/Bal.	06 mm
L/Bal.	06 mm	L/Bal.	06 mm
D.O.A.	30/12/2022	D.O.I.	17/01/23.

Survey held at CAS.

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

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

Date / Time	Action / Instruction
	TP 1st Cap.
16/2/23	LS $9100 confirmed by email (red 24,329.50, 72%)
	MV : 40K.
	PV : 24.2K
	Nett. 15.8K

Date/Time, File Pass to? 1) _____ ☐ : Preli. Report ☐ : Final Report

Date/Time, File Return to? 2) 16/2/23-typist

Report Format : TP

Invoice Issue / PO # : LS $9100

Days Of Repair: 9

Resurvey No. of Trip: _____

Add'l Fee: ☐ : Site Insp ($ _____) ☐ : Interview ($ _____) ☐ : Temp. Insp ($ _____)

(23 x 15)

Survey Fee:	170 + 345
Transportation:	50
$ + RS	
Photos	38
Other	
T:	603

380

OSY 24/2/23