OWNER:

ASS. REC. BY:

REF: CS|MSG23000560|Scy3

OS+

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: MSIG

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: $79k

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 7 days Res: Yes or No

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SGX1283J Yr Regn: 16 Dec 2014

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

Truck / Trailer or

Make: toyota harrier cc 1986

Colour: White A/C: Insured / Std / Nil / NA

Sp.Reading: 157772 T/Radio: Insured / Std / Nil / NA

Eng/No: -

C/No: ZSU 600b 25013

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 235/55R18

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. 14/1/23 D.O.I. 18/1/23 3pm

Survey held at 355m

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
20/7/23	Joseph (MSIG) had agreed with Derrick on the COR at LS $9500/-.

Balance: 23 m
yearly: 36K
MV: 79K
IVU: 54K

Date/Time, File Pass to?
1)
Date/Time, File Return to?
2)

☐ : Prelim. Report
☑ : Final Report

Days Of Repair: 7

Resurvey No. of Trip:

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

Survey Fee:
Transportation:
$ + RS $
Photos
Others
TOTAL

Report Format: TP

Lump Sum / I.B.I: ($ 9500/-)