

REC BY: Tau

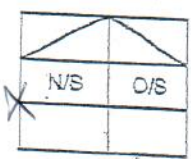
REF: CS3/CT1-23000643/Tup3

ASSIGNMENT

From: _____ Date: _____
 Estimated cost: _____
 OD / TP / VS / TP RES / OD RES / EVA / INV / MV
 To inspect Vehicle No: _____
 at Workshop this _____
 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.



Bal. or Market Value: _____
 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: YPT93P Yr Regn: _____
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: Isuzu C.C. _____
 Colour: Blue A/C: Insured / Std / Nil / NA
 Sp. Reading: 254416 T/Radio: Insured / Std / Nil / NA
 Eng/No: _____
 C/No: _____
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Leaked / Burnt or _____
 Brakes: In order / Jammed / Leaked / Burnt or _____
 Mod: Nil / S/Rim / STD A/Rim or _____
 Tyre Size: F: 195/85R16
 R: 1 (0)
 ES / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO, etc
 Front: _____ Rear: _____
 R/Bal. 6 mm R/Bal. 6/6 mm
 L/Bal. 6 mm L/Bal. 6/6 mm
 D.O.A. _____ D.O.I. 26/1/23P/0/0am
 Survey held at Tai Tiang
 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
	Repair Range: \$4000 - \$5000, 6 days
	No GIA.

Date/Time, File Pass to? : Prel. Report
 : Final Report
 1) _____
 Date/Time, File Return to? _____

Days Of Repair: _____
 Resurvey No. of Trip: _____

Add Fee: : Site Insp (\$ _____)
 : Interview (\$ _____)
 : Tech. Insp (\$ _____)
 : Weekend (\$ _____)

Survey Fee: _____
 Transportation: _____
 S + RS. \$ _____
 Photos _____
 Others _____

Report Format: _____
 Lump Sum / B.A. / F. _____