

ASS. REF. 1480L

REF: CS/AGI23002155/Tvy3

ASSIGNMENT

2023 June
2008, June

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: **SLG 1480L**

Policy No. _____

Claims No. **C10020734/JT**

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: **46K**

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 **WP**

Date: _____ Person Contacted: **Lelia** Vehicle: IN / OUT

Veh No: **SLG 3540H** Yr Regn: **2008, June**

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

Truck / Trailer or _____

Make: **Honda Jazz** C.C. **1539**

Colour: **Silver** A/C: Insured / Std / NI / NA

Sp. Reading: **221657** T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: **SHIM 601850 85212812**

Gen. Cond: **Good** / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: **NIL** / S/Rim / STD A/Rim or

Tyre Size: F: **195/55R15**

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. _____ mm

D.O.A. **25/2/23** D.O.I. **21/3/23**

Survey held at **Accord Auto**

Des. of Damages **Ft / Rear / O/S / N/S / W/C / Rooftop** or

N/S Rear

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

Date / Time Action / Instruction

8/3/23 Lump Sum \$750 confirmed by email (Red 4823.74, 86%)

Date/Time, File Pass to?

☐ : Preli. Report

1)

☐ : Final Report

Date/Time, File Return to?

2) **8/3/23-typist**

Report Form: **TP**

Lump Sum / L.B. / P: **\$750**

Days Of Repair: **2**

Resurvey No. of Trip: **1**

Add Fee: ☐ : Site Insp (\$)

☐ : Interview (\$)

☐ : Tech. Invs (\$)

☐ : Weekend (\$)

Survey Fee:

Transportation:

S + RS. SI

Photos

Others

TOTAL

BLOCK 1009 BUKIT MERAH LANE 3
#01-80 SINGAPORE 159723
TEL:62715133 62717433 FAX:62745715

Pg2

DOA: 25.2.2023

No	Description	Unit	List (\$)
Special Nett			
1	REAR BUMPER & FENDER SHIELD CLIPS nn	1	\$ 50.00
Labour			
1	Spray Painting to All Affected Areas	1	\$ 1,500.00
2	Labour Remove / Refix Accident Damages parts to knock , jack, cut weld and realign accident affected area	1	\$ 1,600.00
3	Check Wiring System & Light	1	\$ 100.00
4	Anti Rust Treatment	1	\$ 120.00
<p>Taylor 92495719</p> <p>WP' 2/2/23 @ 1230pm</p> <p>cl's Resurvey after repair</p> <p>2 days</p> <p>Taylor cl/WKundson</p>			
<p>LKK Auto Consultants hence notify the Repairer of the following:</p> <ul style="list-style-type: none"> To resurvey before/after spray painting To display damaged part(s) during resurvey Parts prices are subject to confirmation Third party survey is on a "Without Prejudice" basis No illegal modification(s) is allowed Supplementary item(s) must be resurveyed and 			
Total (B) :			\$ 3,370.00
Grand Total:			\$ 5,573.74

Date _____