(08/11/13) wef

ASS. REC. BY:

REF: CS|CTI 23002797|SVP3

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No: SFK 5588I

at Workshop m/s Bifrost Auto

of

Insured: GBB 164B

Policy No. DMCVSNW0004048200

Claims No. SNM23D302000/02|TAYHP

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: $ 75k.

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

Vehicle: IN / OUT

Date: Person Contacted: Rep 13k.

Veh No: SFK 5588I Yr Regn: / 2008

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

Make: Volkswagen Golf GTI c.c 1984

Colour Yellow|Black A/C: Insured / Std / NI / NA

Sp.Reading 213365 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: WVWZZZ1KZ8U * 026187

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|40 ZR18

R: "

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.	16/3/23	D.O.I.	20/3/23

Survey held at

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

Rear O/S

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

Date / Time	Action / Instruction
5/7/23	Lump Sum $3550 confirmed by email (Red 16,796.40,82%)

Date/Time, File Pass to? ☐ : Preli. Report

1) ☐ : Final Report

Date/Time, File Return to?

2) 5/7/23-typist

Days Of Repair: 3

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Invs ($)

☐ : Weekend ($)

Report Format : Merimen

Lump Sum / ~~I.B.I.~~ ($ 3550)

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