

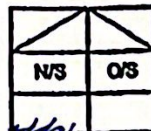
06/11/18
ASS. REC. BY: SMJ REF: EST

ASSIGNMENT

From: _____ Date: _____
Estimated Cost: _____
OD/TP/WS/TP RES/OD RES/EVA/INV/MV
To Inspcd Vehicle No: _____
at Workshop m/s _____
of _____
Insured: INC
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.



Bol. or Market Value: _____

IDAC Accident Report: _____ Consistent? Yes or No

GIA / PR Sect: _____ Consistent? Yes or No

Est. Repairs: 2 days Rep: Yes or No

Lump Sum: _____ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN/OUT

Veh No: SHD 8628X Yr Reg: 4/12/18
Type: M/Car / M/Cycle / Bus / Van / Lorry / Trail / Prime Mover L
Truck / Trailer or _____
Make: Hyundai i30 cc 1580
Colour: Yellow AC: Insured / Std / NI / NA
Sp. Reading: 459/99 T/Radio: Insured / Std / NI / NA
Eng No: _____
C/Nr: KmhC8510000121709
Gen. Cond: Good / Fair / Poor / Burnt
Steering: In order / Jammed / Leaked / Burnt or
Brake: In order / Jammed / Leaked / Burnt or
Mod: NI / S/Rim / STD / R/Rim, or

Tyre Size: F: 195/65R15
R: _____

BS / DUN / EXNOVA / GY / FS / LZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or one of these

Front	Rear
R/Bal. <u>5</u> mm	R/Bal. <u>5</u> mm
L/Bal. <u>5</u> mm	L/Bal. <u>5</u> mm
D.O.A. <u>23/12/23</u>	D.O.I. _____

Survey held at Comfort

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

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

Date / Time	Action / Instruction
<u>1/5/18</u>	

Date/Time, File Pass to?

☐ : Prell Report

1) _____
Date/Time, File Return to?

☐ : Final Report

2) _____

Report Format:

Lump Sum / LBJ: (\$ _____)

Days Of Repair: _____

Resurvey No. of Trip: _____

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

Survey Fee:

Transportation: _____

Photos: _____

Others: _____

TOTAL

member of COMFORTDELGRO

Date/Time: 23.02.2023 16:11

Page : 1

Job: ARC Repair TP(CFS0)1

JOB CARD Sales Order: 5886996

JC NO305546535

OWNER

IS CITYCAB PTE LTD
OWNER NO. 7010070
LESS 383 SIN MING DRIVE
Singapore SINGAPORE 575717
65551188 (O)

REGN NO:

SHD8628X

MILEAGE

MAKE:

HYUNDAI

FUEL

E.....1/2.....F

MODEL

IONIQ(G2)

DATE/TIME IN 23.02.2023 11:30

YR OF MANU

04.12.2018

TARGET DATE

CHASSIS CODE

KMHC851CVKU121799

COMPLETION DATE/TIME:

JUNT CARD NO.

JOB DESCRIPTION

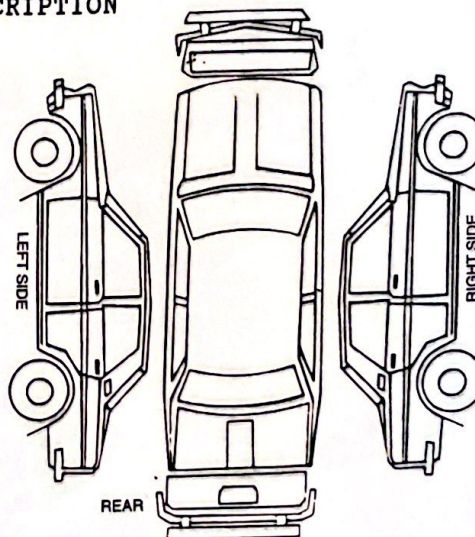
Accident Date: 23.02.2023
NATURE: 3P 23.02.2023

/NO

LABOR CODE

DESCRIPTION

FRONT



REKED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Redemption Slip

Exit Pass

No.: SHD8628X

YY

Vehicle No.:

SHD8628X

Service Advisor

Signature/Date

Name of Service Advisor

Date

turned to Service Reception upon collection

To be kept by Security Guard