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ASS. REC. BY:

REF:

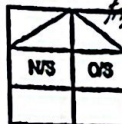
ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop n/s: _____
 of: _____
 Insured: CTI
 Policy No.: _____
 Claims No.: _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Vch: _____

Vch No: Shd 357H Yr Make: 21/01/2018
 Type: MCar / MCycle / Bus / Van / Lorry / Taxi / Private Hire / L
 Truck / Trailer or
 Make: Hyundai 10/19 21580
 Colour: Blue AC Insured / Sd / B / NA
 Sp. Reading: 261719 TP. Radio Insured / Sd / B / NA
 Eng No: _____
 Ch No: Kmh 851 CV 5U103890
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Incorporated / Jammed / Leaked / Burnt or
 Brake: Incorporated / Jammed / Leaked / Burnt or
 Mod: Nil / Sides / STD / Air / or

(Policy Condition)

Remark: The vch had commenced its repair at the time of inspection.



Est. or Market Value: _____
 IDAC Accident Report: _____ Consistent: Yes or No
 GIA / PR Sect: _____ Consistent: Yes or No
 Est. Repairs: 2 days Res: Yes or No
 Lump Sum: 20 % 3 Val: Yes or No

Tyre Size: F: 125/65 R15
 R: _____
 BS / DUN / EXNOVA / GY / FS / LZA / WIC / CHTSU / PRI / SUNI /
 TOYO / YOKO or Lanxier
 Front: _____ Rear: _____
 RUBal: 5 mm RUBal: 5 mm
 LUBal: 5 mm LUBal: 5 mm
 DOA: 5/3/23 DOA: 6/3/23 4pm
 Survey held at: Comfort

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Des. of Damages: Fnt / Rear / C/S / N/S / WIC / Roof / or
Frt + C/S.

The WIC / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

L/S =

Date/Time, File Pass to?

☐ : Prell. Report

☐ : Final Report

1)

Date/Time, File Return to?

2)

Report Format:

Lump Sum / L.B. (\$ _____)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee:

☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Invs (\$ _____)

☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

3 + 12.5

Photos:

Others:

TOTAL

Item: ARC Repair TP(CLS0)1

JOB CARD Sales Order: 5888374

JC NC05547364

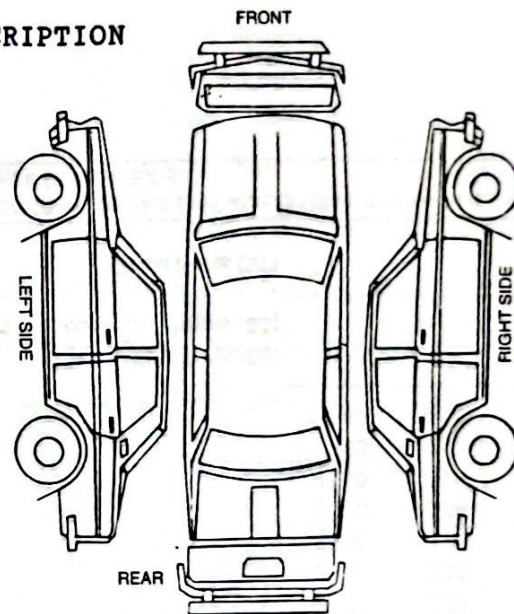
OWNER: COMFORT TRANSPORTATION PTE LTD
 OWNER NO: 7010045
 ADDRESS: 383 SIN MING DRIVE
 Singapore SINGAPORE 575717
 (R) 65508755 (O)
 (P)
 JUNT CARD NO.

REGN NO: SHD3571H	MILEAGE
MAKE: HYUNDAI	FUEL E 1/2 F
MODEL IONIQ(G2)	DATE/TIME IN 06.03.2023 09:25
YR OF MANU. 12.07.2018	TARGET DATE
CHASSIS CODE KMHC851CVJU103590	COMPLETION DATE/TIME

JOB DESCRIPTION

Accident Date: 05.03.2023
 Nature: 3P.05.03.23

NO LABOR CODE DESCRIPTION



KEYED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Edge Slip

Exit Pass

Vehicle No.: SHD3571H

JU CHINA

Vehicle No.:

SHD3571H

Service Advisor

Signature/Date

Name of Service Advisor

Date

Turned to Service Reception upon collection

To be kept by Security Guard