

ASS. Fmt. BY:

REP:

CS/FCI23003450/Any3e2

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

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.

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 4 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: FBC8776C

Yr Regn: 2008, August

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

Truck / Trailer or

Make: Yamaha

T135

c.c

135

Colour: Green

A/C: Insured / Std / NI / NA

Sp. Reading: 73874

T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: 57P300139

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modif: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 20/90R17

R: 20/80R17

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Maxxis

Front

Rear

R/Bal. 06

mm

R/Bal. 06

mm

L/Bal. _____

mm

L/Bal. _____

mm

D.O.A. _____

D.O.I. 03/04/23

Survey held at JD Motorsport

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

TP 1st Cap

COE Expiry: 05/08/2028

Adrian confirmed lump sum: \$2200 and 4 days

MV: 7.5K

(red, \$8005, 78%)

PV: 3.7K

Nett: 3.8K

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: 4

Resurvey No. of Trip: _____

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Inve (\$

Survey Fee: 170

Transportation: 60

S + RS: 50+50

Photos: 058

Others: 1916/3

121

441

Report Format:

Report Format: FBC 1.0