ASS. REC BY: REF: CS/EG123003494/Acy 3

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 Rport: _____ Consistent? : Yes or No

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

Est. Repairs: 5 days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: PC6694C Yr Regn: 2017, Oct.

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

Make: Toyota Hiace Commuter 2982

Colour: White A/C: Insured / Std / NI / NA

Sp.Reading: 258471 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: KDH223003029 3

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: 185R15C

R: 185R15C

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

Front		Rear	
R/Bal.	06 mm	R/Bal.	06 mm
L/Bal.	06 mm	L/Bal.	06 mm
D.O.A.		D.O.I.	05/04/23

Survey held at Automobile Hub.

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 Ergo.
6/7/23	Adrian finalised LS $2900/-; 5 days with repairer. (Ref. $2823.43, 492.)
	MV :
	PV :
	Nett :
	851A.

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

1) _____ ☑ : Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: 5

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

☐ : Tech. Invs ($ _____)

Survey Fee:

Transportation: ___S + RS.___SI

Photos

Others

Report Format : TP

Liability : (Yes) / No / LS $2900/-