ASS. REC. BY: Kenneth | REF: SMO/23004042/KV

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Soon Lee Choon

of 5032 283 6096

Insured: SMV 2939J

Policy No. _____

Claims No. CMTD2301536/GPL

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

1pm

(Policy Condition)

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

N/S	O/S

Bal. or Market Value: $43K

IDAC Accident Rport: _____ Consistent? : Yes or No

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

Est. Repairs: 04-5 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SKS6709U Yr Regn: 09, 15

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

Make: BMW 316i c.c 1598

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

Sp.Reading 176173 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WBA3A160XC0NS38395

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: 245/35 ZR19

R: _____

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

Front		Rear	
R/Bal.	7 mm	R/Bal.	7 mm
L/Bal.	7 mm	L/Bal.	7 mm
D.O.A.	15/4/23	D.O.I.	20/4/2023 2pm

Survey held at _____

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

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

Date / Time	Action / Instruction
/	PRS
21/4/23	En repair cost $7-9K

Date/Time, File Pass to?

1) _____

Date/Time, File Return to?

2) 21/4/23-typist

☐ : Prell. Report

☐ : Final Report

Days Of Repair: 5

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____)

☐ : Interview ($ _____)

Tech Invs ($ _____)

Weekend ($ _____)

Survey Fee: _____

Transportation: _____ $ - RS. _____ SI

Parking _____

Others _____

TOTAL _____

Report Format :

Lump Sum / I.B.I: ($ _____)