

Ass. Ref. BY:

REF:

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspected Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claim No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

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

Est. Repairs: _____ 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: SL28588P Yr Regn: 2021 / Feb.

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

Truck / Trailer or

Make: BMW 216i Gran Tourer C.C. 1499

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

Sp. Reading: 71157 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WBA6V120605-873989

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 205/55R17

R: 205/55R17

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

TOYO / YOKO or

Front _____ Rear _____

R/Bal. 06 mm R/Bal. 06 mm

L/Bal. 06 mm L/Bal. 06 mm

D.O.A. _____ D.O.I. 26/04/23

Survey held at Advence

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 III

COE Expiry :

Estimate given during : Yes ()
1st Survey : No (✓)

MV :

PV :

Nett :

443D

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: _____

Resurvey No. of Trip: _____

Survey Fee: _____

Transportation: _____

Add Fee:

☐

: Site Insp (\$ _____)

☐

: Interview (\$ _____)

☐

: Tech. Inve (\$ _____)

\$ + R.S. \$ _____

Photos _____

Others _____

Report Format: _____

1. Printout Form / L.P.R. Form