(08/11/13) wef

ASS. REC. BY: Marcus

REF: CS/TP2300 4464/Uny3 mH

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No: SKX6649H

at Workshop m/s 3mf

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: $42k.

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 7 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS 26 9 B

Vehicle: IN / OUT

Date: Person Contacted: LTA 825263

Veh No: SKX6649H Yr Regn: 22/12/15

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

Make: Toyota Vios G c.c 1497

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

Sp.Reading 66615 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: MHFBT9F3806051770

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: 195/50R16

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.	27/04/23	D.O.I.	3/5/23

Survey held at

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

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

Date / Time	Action / Instruction
	Dep 13k.
24/5/23	Nthuc 3d 2yrs 7yrs F1A Grey L/S $6200 inbrief kenny (red 5845.50, 48%)

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

1) ☐ : Final Report

Date/Time, File Return to?

2) 24/5/23-typist

Report Format : TP

Lump Sum / ~~I.B.I.~~ ($ 6200)

Days Of Repair: 7

Resurvey No. of Trip: 3

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Invs ($)

☐ : Weekend ($)

Survey Fee:	170 + 30 (2 X 15)
Transportation:	50
__S + RS, __SI	50+50+50
Photos	152
Others	80
TOTAL	632