

ASS. REC. BY:

REF:

TV / 2.3004752/KP

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.

Bal. or Market Value:

IDAC Accident Rpt:

GIA / PR Seen:

Est. Repairs:

Lum Sum:

Consistent? : Yes or No

Consistent? : Yes or No

Res.: Yes or No

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Date / Time

Action / Instruction

GIA & EIT not ready

File Pass to?

☐ : Prell. Report☐ : Final Report

File Return to?

Format:

n / I.B.I: (\$

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp (\$☐ : Interview (\$☐ : Tech Invs (\$☐ : Weekend (\$

Survey Fee:

Transportation:

S - RS. SI

Fees

Others

Veh No:

SJS 8017 G

Yr Regn:

09, 09

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

Truck / Trailer or

Make:

Honda odyssey

Colour:

M. Grey

Sp. Reading

211 783

Eng/No:

C/No:

JHMRB38509.0 200307

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: Nil / STD A/Rim or

Tyre Size:

F:

R:

225/45 R18

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

Front

R/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

3/5/23

Survey held at

Des. of Damages: Frt / Rear / OIS / NIS / UIC / Rooftop or

NIS body

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

Rear

R/Bal.

7

mm

L/Bal.

7

mm

D.O.I.

9/5/2023