

ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 OO/INS/TPRES/LOO RES/EVA/INV/MV  
 To Inspect Vehicle No: \_\_\_\_\_  
 at Workshop no: \_\_\_\_\_  
 of \_\_\_\_\_  
 Insured: SNH 238Z AIG  
 Policy No. 7220098989  
 Claims No. 2237706254SG  
 Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_  
 (Client's Record)  
 Make of Veh: \_\_\_\_\_

Veh No: GBL 7020 C Yr Regn: 28/03/2012  
 Type: M.Car / M.Cycle / Bus / Vgn / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or \_\_\_\_\_  
 Make: Nissan NV350 Drivan cc 1998  
 Colour: Grey A/C: Insured / Std / NI / NA  
 Sp Reading: 11327 T/Radio: Insured / Std / NI / NA  
 Eng/No: QR20020448R  
 C/No: JN1MA2E262000 \*418  
 Gen. Cond: Ggd / Fair / Poor / Burnt  
 Steering: Ino/der / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Brake: Ino/der / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Mod: 11 / S/Rim / STD A/Rim or \_\_\_\_\_

(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. Repair: 03 days Res.: Yes or No  
 Lum. Sum: 30 % 3 Val.: Yes or No  
 CA / REV / REP. / 24 HRS  
 Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

N/S	O/S

Tyre Size: F: 195/80 R15  
 R: 195/80 R15  
 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. 25/03/23 D.O.I. 29/03/23 1213  
 Survey held at Polymath Garage Pte Ltd  
 Des. of Damages: Fnt / Rear / O/S / N/S / UIC / Rooftop or  
 O/S rear  
 The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction	
	Repair Range	Balance: 108M
	03 days	Yearly: \$75K
	\$12K - \$22K	
9/5/23	Submit DAR	MV = \$65K
		LTA = \$27,519
25/5/23	Submit LS \$1200 (Red 300, 20%)	NV = \$37,492

Date/Time, File Pass to?  : Prel. Report  
 : Final Report  
 1) \_\_\_\_\_  
 Date/Time, File Return to?  
 2) 25/5/23-typist  
 Report Format: \_\_\_\_\_  
 Lump Sum / I.B.I: (\$ \_\_\_\_\_)

Days Of Repair: 4  
 Resurvey No. of Trip: \_\_\_\_\_  
 Add Fee:  : Site Insp (\$ \_\_\_\_\_)  
 : Interview (\$ \_\_\_\_\_)  
 : Tech. Invs (\$ \_\_\_\_\_)  
 : Weekend (\$ \_\_\_\_\_)

Survey Fee:

Transportation:	\$ - RS \$
Photos:	
Others:	
TOTAL:	