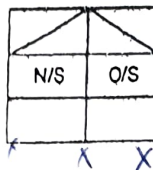


ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
QD / 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: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 2 days Res.: Yes or No
 Lum Sum: _____ % Val.: Yes or No

CA / REV / REP. / 24 HRS

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

Veh No: SHC 8311P Yr Regn: 27 JUL 2021
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: HYUNDAI i80N/Q 43 c.c. 1,580
 Colour: BLUE A/C: Insured / Std / NI / NA
 Sp. Reading: 231,507 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: KMH C851CVLUJ93155
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or
 Brake: Inorder / Jammed / Leaked / Burnt or
 Modl: NII / S/Rlm / STD A/Rlm or
 Tyre Size: F: 195/65R15
 R: 11
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or WESTLAKE

Front	Rear
R/Bal. <u>5</u> mm	R/Bal. <u>8</u> mm
L/Bal. <u>5</u> mm	L/Bal. <u>8</u> mm
D.O.A. <u>1/6/2023</u>	D.O.I. <u>5/6/2023</u>

 Survey held at DAE LOYANA
 Des. of Damages: Frt / Rear / O/S / NIS / U/C / Rooftop or
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	Nazz confirmed final fig \$1376.12 and 2 days
	(red, \$155.6, 10%)

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

1) Date/Time, File Return to?

2) _____

Report Format : _____
 Lump Sum / I.B.I: (\$ _____)

Days Of Repair: 2
 Resurvey No. of Trip: _____

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

Survey Fee:

Transportation:

\$ - RS - SI

Photos

Others

TOTAL

INC PIP