

ASS. REC. BY: SteveREF: CS3/A16 29908776/E+13

## ASSIGNMENT

From: PRS Date: \_\_\_\_\_  
Estimated Cost: \_\_\_\_\_  
OD / TR / 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.

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
N/S	O/S

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: ERT 181J Yr Regn: \_\_\_\_\_  
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
Truck / Trailer or \_\_\_\_\_  
Make: Yamaha c.c. \_\_\_\_\_  
Colour: Blue A/C: Insured / Std / NI / NA  
Sp. Reading: 15160 T/Radio: Insured / Std / NI / NA  
Eng/No: \_\_\_\_\_  
C/No: MH350C094 OK 663273  
Gen. Cond: Good / 1 / Poor / Burnt  
Steering: In order / Jammed / Leaked / Burnt or  
Brake: In order / Jammed / Leaked / Burnt or  
Modl: NII / SR / STD A/Rim or  
Tyre Size: F: 60/70-17  
R: 11

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or 8

Front	Rear
R/Bal. <u>5</u> mm	R/Bal. <u>5</u> mm
L/Bal. _____ mm	L/Bal. _____ mm
D.O.A. <u>17/8/90</u>	D.O.I. <u>21/8/90</u>

Survey held at Equator  
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
	submit dar report

Date/Time, File Pass to?

☐ : Prel. Report

1)

☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 4

Resurvey No. of Trip: \_\_\_\_\_

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

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

S + RS. \$ \_\_\_\_\_

Photos \_\_\_\_\_

Others \_\_\_\_\_

Rep. Formed: \_\_\_\_\_

Lump Sum / L.E. / C. \_\_\_\_\_

TOTAL