

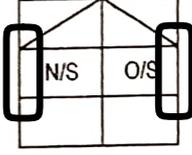
PRS

ASSIGNMENT

21 Feb 2020

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 OD  TP / WS / TP RES / OD RES / EVA / INV / MV  
 To Inspect Vehicle No: \_\_\_\_\_  
 at Workshop m/s JC MOTOR  
 of \_\_\_\_\_  
 Insured: \_\_\_\_\_  
 Policy No. \_\_\_\_\_  
 Claims No. \_\_\_\_\_  
 Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_  
 (Client's Record)  
 Make of Veh: \_\_\_\_\_

Veh No: FX 8840S Yr Regn: \_\_\_\_\_  
 Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or \_\_\_\_\_  
 Make: YAMAHA T150 c.c. 149  
 Colour: GREEN A/C: Insured / Std / NI / NA  
 Sp. Reading: 25022 T/Radio: Insured / Std / NI / NA  
 Eng/No: \_\_\_\_\_  
 C/No: \_\_\_\_\_  
 Gen. Cond:  Good / Fair / Poor / Burnt  
 Steering:  None / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Brake:  None / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Modi:  Nil / S/Rim / STD A/Rim or \_\_\_\_\_  
 Tyre Size: F: 60/80-17  
 R: 70/80-17



(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: \_\_\_\_\_ % 3 Val.: Yes or No  
 CA / REV / REP. / 24 HRS  
 Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

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

<u>Front</u>	<u>Rear</u>
R/Bal. <u>5</u> mm	R/Bal. <u>5</u> mm
L/Bal. _____ mm	L/Bal. _____ mm
D.O.A. _____	D.O.I. <u>29-10-2020</u>
Survey held at <u>W/S</u>	<u>5:30pm</u>

 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
	Yes/No BI Involved - w/s don't know
	No GIA provided
	<b>submit DAR REPORT</b>

Date/Time, File Pass to?  : Preli. Report  
 : Final Report  
 1) \_\_\_\_\_  
 Date/Time, File Return to? \_\_\_\_\_

Days Of Repair: 2  
 Resurvey No. of Trip: \_\_\_\_\_

2) \_\_\_\_\_  
 Report Filed at: \_\_\_\_\_  
 Long. Code / MP: \_\_\_\_\_

Add Fee:  : Site Insp (\$ \_\_\_\_\_)  
 : Interview (\$ \_\_\_\_\_)  
 : Tech. Insp (\$ \_\_\_\_\_)  
 : W/weekend (\$ \_\_\_\_\_)

Survey Fee:	
Transportation:	
_____ \$ + RS. _____ \$	
Photos	
Other:	
TOTAL	