ASS. REC. BY: Steve | REF: CS 3/INC 20011978/Eqf3

PRS

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. MT/1107914-001

Sum Insured: .... Excess: ....

(Client's Record)

Make of Veh: ....

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value: ....

IDAC Accident Rport: .... 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

Vehicle: IN / OUT

Date: .... Person Contacted: ....

Veh No FBQ 4832B Yr Regn: 15/10/19

Type: M.Car / (M.Cycle) / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or

Make: Yamaha MX King c.c 150

Colour Blue A/C: Insured / Std / Nil

Sp Reading 25490 T/Radio: Insured / Std / Nil

Eng/No: ....

C/No: MH3UG0TS0KK029778

Gen. Cond: (Good) / Fair / Poor / Burnt

Steering: (In order) / Jammed / Leaked / Burnt or

Brake: (In order) / Jammed / Leaked / Burnt or

Modi: Nil / (S/Rim) / STD A/Rim or

Tyre Size: F: 70/80-17

R: 80/90-17

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

	Front		Rear	
R/Bal.	5	mm	R/Bal.	5 m
L/Bal.		mm	L/Bal.	m
D.O.A.	23/10/20		D.O.I.	3/11/20

Survey held at Garage 13

Des. of Damages (Frt) / Rear / O/S / (N/S) / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collisi

Date / Time	Action / Instruction
	MV - 9K
	Submit PRS

Date/Time, File Pass to? [ ] : Prell. Report

04/11 Typist [ ] : Final Report

Date/Time, File Return to?

Days Of Repair: ....

Resurvey No. of Trip: ....

Add Fee: [ ] : Site Insp ($ ....)

[ ] : Interview ($ ....)

[ ] : Tech. Invs ($ ....)

[ ] : Weekend ($ ....)

Survey Fee: ....

Transportation: ....

__S + RS.__SI

Photos ....

Others ....

TOTAL ....

Rep[redacted]Format : PRS

Lump Sum / LB.L: ....)