

ASSIGNED BY

*PR*  
*PRS*

*AIG*

**ASSIGNMENT**

From \_\_\_\_\_ Date \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: \_\_\_\_\_

at Workshop n/s *SS Motoring*

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.

<i>✓</i>	<i>✓</i>
N/S	O/S

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: 5 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

Veh No: *FB R 3724* Regn: *96 Feb 2020*

Type: *M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /*

Truck / Trailer or

Make: *Honda ADV 150 c.c. 149*

Colour: *Red* A/C: *Insured / Std / NI / NA*

Sp Reading: *-* T/Radio: *Insured / Std / NI / NA*

Eng/No: \_\_\_\_\_

C/No: *MH 1KF 6117 & K 013895*

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: *110/80-14*

R: *130/70-13*

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or *Federal*

Front \_\_\_\_\_ Rear \_\_\_\_\_

R/Bal. 6 mm R/Bal. 6 mm

L/Bal. \_\_\_\_\_ mm L/Bal. \_\_\_\_\_ mm

D.O.A. \_\_\_\_\_ D.O.I. 16-12-20

Survey held at W/S 4:05

Des. of Damages: *Front / Rear / O/S / N/S / U/C / Rooftop or*

*and*  
The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time \_\_\_\_\_ Action / Instruction \_\_\_\_\_

**SUBMIT DAR REPORT**

Date/Time, File Pass to?  : Preli. Report

1)  : Final Report

Date/Time, File Return to?

2) \_\_\_\_\_

Days Of Repair: 5

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

Add Fee:  : Site Insp (\$)

: Interview (\$)

: Tech Insp (\$)

: Other (\$)

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

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

3 + PS. SI \_\_\_\_\_

Photos \_\_\_\_\_

Other \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_