GQ
PRS

CS3/SM021000061/GUqd3

ASSIGNMENT

Estimated Cost
/TP/WS/TP RES/OD RES/EVA/INV/MV
Inspect Vehicle No:
Workshop m/s: Carsmith

Insured:
Policy No:
Claims No: CMTD2003605/MYE
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

Veh No: GBJ5928Y Date: 13 Jun 2019
Type: M Car / M Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or
Make: Toyota Hiace cc: 2982
Colour: Silver A/C: Insured / Std / NI / NA
Sp Reading: 68542 T/Radio: Insured / Std / NI / NA
Eng/No:
C/No: JTFHT02P300249128
Gen Cond: Good / Fair / Poor / Burnt
Steering: Inorder / Jammed / Leaked / Burnt or
Brake: Inorder / Jammed / Leaked / Burnt or
Modi: Nil / S/Rim / STD A/Rim or
Tyre Size: F: 195R15
R: 11
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

Front			Rear		
R/Bal.	6	mm	R/Bal.	6	mm
L/Bal	6	mm	L/Bal	6	mm
D.O.A			D.O.I.	05-01-21	

Survey held at: W/S 11:30
Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Rear O/S
The U/C / Chassis frame / Body Structure affected due to collision.

Val. or Market Value:
POAC Accident Rport: Consistent? : Yes or No
GIA / PR Seen: Consistent? : Yes or No
Est. Repairs: 3 days Res.: Yes or No
Lum Sum: % 3 Val.: Yes or No
CA / REV / REP. / 24 HRS
Vehicle: IN / OUT
Date: Person Contacted:

Date / Time	Action / Instruction
	$1000 – $2000
	Submit PRS.

Date/Time File Pass to?
07/01 Typist
Date/Time File Return to?

☐ : Preli. Report
☐ : Final Report

Days Of Repair: 3
Resurvey No. of Trip: 1

Survey Fee:
Transportation

Add Fee: ☐ Site Insp: S$
☐ Interview: S$

PRS