GR
PRS

CS3/Lpc21000513/Gqd3 | 9

(2024)

ASSIGNMENT

Date:

Estimated Cost:

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

Inspect Vehicle No:

Workshop m/s: Garage 13

Insured:

Policy No.:

Claims No.: 20/21/21/VP05/024115

Claim 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

Total or Market Value: $21K.

PDAC Accident Rport: Consistent? : Yes or No

PIA / PR Seen: Consistent? Yes or No

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

Claim Sum: % 3 Val : Yes or No

PCA / REV / REP. / 24 HRS

Date: Person Contacted: Vehicle: IN / OUT

Vehicle No: SJT3655 1st Regn: 24 Sep 2009

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

Make: Toyota Vios cc: 1497

Colour: Blue A/C: Insured / Std / NI / NA

Sp Reading: 230662 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: MR053HY93051311 82

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: 205/45ZR16

R: 11

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

Front		Rear	
R/Bal	6 mm	R/Bal.	6 mm
L/Bal	6 mm	L/Bal	6 mm

D.O.A: D.O.I. 12-01-21

Survey held at w/s 12pm

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or o/s frt

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

Date / Time	Action / Instruction
	$ 3000 – $ 4000.
	COE: 1065
13/01/21	Submit PRS.

Date/Time. File Pass to: ☐ : Preli. Report

13/01 Typist ☐ : Final Report

Date/Time. File Return to:

PRS

Days Of Repair: 5

Resurvey No. of Trip:

Addl Fee: ☐ Site Insp ($)

☐ Interview ($)

☐ [illegible]

Survey Fee:

Transportation

[illegible]