Assigned By: GR. PRS

AXA

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s: JC Auto

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.

N/S	O/S

Bal. or Market Value: $10K

IDAC 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:

Veh No: FBN5914H Reg: 05 Nov 2018

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Truck / Trailer or TFX150

Make: Yamaha XABRE cc 150

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

Sp.Reading: 31818 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: MH3RG3710 JK027725

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: 110/70-17

R: 140/70-17

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

Front		Rear	
R/Bal.	5 mm	R/Bal.	5 mm
L/Bal.	mm	L/Bal.	mm
D.O.A.		D.O.I.	03-02-21

Survey held at: N/S 11:30

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
	COE: 3185
	$3000 - $4000 (REAPIR RANGE)
	GIA Not Given. SUBMIT PRS REPORT

Date/Time, File Pass to? 1)

Date/Time, File Return to? 2)

☐ : Prell. Report

☐ : Final Report

Days Of Repair: 3

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp ($

☐ : Interview ($

☐ : Tech. Insp. ($

☐ : Other Fees ($

Survey Fee:

Transportation

Photos

Other

Total

Repair Estimate:

Lump Sum / Ledger: