- 012 1		SSIGNMENT
eprs.	<u>A</u>	
om:	Date:	Veh No: Skx 49967 Yr Regn: 16/12/2015
limated Cost:		Type: M.Car M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
TPIWSITP	RES / OD RES / EVA / INV / MV	Truck / Trailer or
Inspect Vehicle	No:	Make: Volkswagen Tigyan c.c 1984
Workshop m/s		Colour Black. A/C: Insured / Std / NI / NA
·		Sp.Reading 60323 T/Radio: Insured / Std / NI / NA
sured:		Eng/No:
olicy No.		C/No: <u>WYGZZZ5NZGW676823</u>
	20/21/21/VC05/024238	Gen. Cond: Good / Fair Poor / Burnt
um Insured:	Excess:	Steering: I lorder / Jammed / Leaked / Burnt or
(Client's Record	 ()	Brake: In order / Jammed / Leaked / Burnt or
lake of Veh:		Modi: Nil / S/Rim / S(D A)Rim or
_		Tyre Size: F: 255/402 R19
(Policy Conditio	on)	R: 255 /40 ZR19.
•		O/S BS / DUNY EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair :	at the time of inspection.	TOYO / YOKO or
Bal. or Market Va	alue:	<u>Front</u> <u>Rear</u>
DAC Accident R	Rport: Consistent?: Yes or No	R/Bal. 6 mm , R/Bal. 6 mm
GIA / PR Seen	Consistent? : Yes or No	L/Bal. 6 mm L/Bal. 6 mm
Est. Repairs:	4 days Res.: Yes or No	D.O.A. 08/02/2021 D.O.I. 17/02/2021
Lum Sum:	% 3 Val.: Yes or No	Survey held at -Windsor Condo
04 / DEV /	REP. / 24 HRS	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
CA I REV I	Vehicle: In	N / OUT
Date:	Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision
Date / Time	Action / Instruction	
	* No GIA, No Report yet.	
	Submit PRS.	1
	09/03/21 Submit Preli. report.	
	Note: The vehicle has not sen	ıd in for repair.
	* wksp did not know the owne	r use their quotation submit claim to insurance.
Date/Time, File P	ass to? : Preli. Report	Days Of Repair: 4
	<del>  -  </del>	Resurvey No. of Trip: Survey Fee:
1)09/03 T	70.00	Transportation:
Date Hille, File i		.dd Fee: : Site Insp (\$ )_s+Rs_si
2)		: Interview (\$ )) Photos
•		
Rep <b>erio</b> Fol	rmesi: TP	: Tech. Invs (\$ ) Others

Sept.