

AXA

ASS. REC. BY: PR
PRS

ASSIGNMENT

(-2030)

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s: AP Motoring

of _____

Insured: _____

Policy No. _____

Claims No. S1M037QY

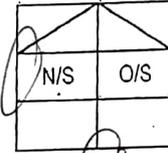
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value: \$12k

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 4 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS _____

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: BE63967 Yr Regn: 09 Jul 2010

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

Make: Yamaha RXZ c.c. 133

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

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

Eng/No: _____

C/No: PMYSPV100A0032113

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Good / Jammed / Leaked / Burnt or

Brake: Good / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 2.50-18

R: 11

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

Front _____ Rear _____

R/Bal. 5 mm R/Bal. 5 mm

L/Bal. _____ mm L/Bal. _____ mm

D.O.A. _____ D.O.I. 22-04-21

Survey held at w/s

Des. of Damages: Frt / Rear / O/S / N/S / UIC / Rooftop or

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

Rebate: 4008

\$2000 - \$3000

26/04/21 @ 3.43pm revised to Dominic Yu via Smart Claims.

26/04/21 Submit PRS.

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

1) 26/04 Typist : Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: 4

Resurvey No. of Trip: _____

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech. Insp (\$ _____)

: Nil (\$ _____)

Survey Fee: _____

Transportation: _____

3 + RS. \$ _____

Photos _____

Other: _____

TOTAL _____

Report Produced: SMART CLAIMS - PRS

Emp. No. / UIC No. _____