

ASS. REC. BY:

Steve

CS/SMR21005202/Euf3

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

QD (TP) WS/TP RES/OD RES/EVA/INV/MV

To Inspect Vehicle No: PC 1655Z

at Workshop m/s STS Transport Management Pte Ltd

of _____

Insured: SMB 1628T

Policy No. _____

Claims No. BUS/04/21/5005

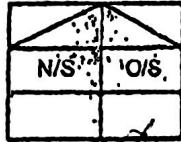
Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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



Bal. or Market Value: _____

IDAC Accident Report: _____ Consistent? : Yes or No

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

Est. Repairs: 2 days Res.: Yes or No

Turn Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: PC 1655Z

Yr Regn: 26/12/12

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

Truck / Trailer or

Make: Golden Dragon

Colour: Multi-colour

Sp. Reading: 452977

Eng/No: _____

C/No: LL38E COT-30A 013047

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: _____ R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or _____

Front

R/Bal. 4 mm

L/Bal. 4 mm

D.O.A. 1/4/21

Survey held at STS Transport

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

Range \$400 - \$500, 2 days

4/5/2021 Submit PRS

Date/Time, File, Poss to?

4/5 TYPIST

Date/Time, File Return to?

☐ : Prel. Report☐ : Final Report

Days Of Repair: 2

Resurvey No. of Trip: _____

Add Fee:

☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Inve (%) _____☐ : Weekend (\$) _____

Survey Fee:

Transportation:

\$ + RS \$1

Photos

Others

TOTAL

2021 FORM 1

MAY 2009 / 1.2.1.1

PRS