

ASS. REC. BY: Stew

CS3/ASM21006201/EVC

**ASSIGNMENT**

From: PRS Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

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

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s # \_\_\_\_\_

of \_\_\_\_\_

Insured: \_\_\_\_\_

Policy No. \_\_\_\_\_

Claims No. \_\_\_\_\_

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

Veh No: SLX 49100 Yr Regn: 31/3/08

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

Truck / Trailer or \_\_\_\_\_

Make: Mercedes Benz C180K cc 1597

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

Sp Reading: 201988 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: W00204462A121959

Gen. Cond: Good /  Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or \_\_\_\_\_

Brake: In order / Jammed / Leaked / Burnt or \_\_\_\_\_

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

Tyre Size: F: 225/452 R17

R: 1

(Policy Condition)

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

N/S	O/S
<u>XXX</u>	

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: \_\_\_\_\_ days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle: IN / OUT

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

TOYO / YOKO or \_\_\_\_\_

Front		Rear
R/Bal. <u>4</u> mm		R/Bal. <u>4</u> mm
L/Bal. <u>4</u> mm		L/Bal. <u>4</u> mm
D.O.A. <u>24/5/21</u>		D.O.I. _____

Survey held at V-FIX

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
	<u>INV-53K repair work 3K-4K</u>
	<u>4 rep days</u>

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

1)  : Final Report

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Date/Time, File Return to? \_\_\_\_\_

2) \_\_\_\_\_

Add Fee:  Site Insp (\$ \_\_\_\_\_)

Interview (\$ \_\_\_\_\_)

Tech. Insp (\$ \_\_\_\_\_)

Wash (\$ \_\_\_\_\_)

Survey Fee:	_____
Transportation:	_____
S + RS	_____
Photos	_____
Other:	_____
TOTAL	_____

Report Forwarded: \_\_\_\_\_

Linking Cases / Updates: \_\_\_\_\_