

ASS. REC. BY: Tang Jiah

REF: CS3/LPC21006283/TH3

### ASSIGNMENT

CoE 2026 Made

From: \_\_\_\_\_ 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: \_\_\_\_\_

(Policy Condition)

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

N/S	O/S
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Bal. or Market Value: 433k

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 WP' PRS

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Veh No: SK91543B Yr Regn: 2006, March

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

Make: Toyota Wish C.C. 1794

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

Sp. Reading: 343947 T/Radio: Insured / Std / NI / NA

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

C/No: ZNE 106289762

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: 195/65R15

R: 20

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or 7ouredor

Front R/Bal. 6 mm Rear R/Bal. 6 mm

L/Bal. 6 mm U/Bal. 6 mm

D.O.A. \_\_\_\_\_ D.O.I. 1/6/21 @ 12pm

Survey held at 333 Auto Garage.

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

GRIF uploaded in views.

**SUBMIT PRS REPORT**

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

1)  : Final Report

Date/Time, File Return to?

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

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

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

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_ \$ + RS. \_\_\_\_\_ \$

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

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

: Tech. Invs (\$ \_\_\_\_\_)

: Weekend (\$ \_\_\_\_\_)

Photos \_\_\_\_\_

Others \_\_\_\_\_

TOTAL \_\_\_\_\_

Report Form: \_\_\_\_\_

Lump Sum / I.B.I. (P) \_\_\_\_\_