

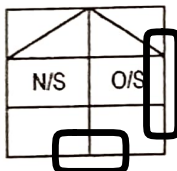
PRS

ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_  
 Estimated Cost: \_\_\_\_\_  
 QD ☒ TP ☐ N/S ☐ TP RES ☐ OD RES ☐ EVA ☐ INV ☐ MV  
 To Inspect Vehicle No: \_\_\_\_\_  
 at Workshop m/s **M1 MOTORING**  
 of \_\_\_\_\_  
 Insured: \_\_\_\_\_  
 Policy No: \_\_\_\_\_  
 Claims No: **MFL2021D0003691**  
 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 Rpt: \_\_\_\_\_ Consistent? : Yes or No  
 GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No  
 Est. Repairs: **3** days Res.: Yes or No  
 Lum Sum: **20** % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

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

Vehicle: IN / OUT

Veh No: **FBR5356Y** Yr Regn: **30/07/2020**  
 Type ☒ M.Car ☐ M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /  
 Truck / Trailer or \_\_\_\_\_  
 Make: **YAMAHA AEROX GDR155R** cc **155**  
 Colour: **RED** A/C: **Insured / Std / NI / NA**  
 Sp. Reading: \_\_\_\_\_ T/Radio: **Insured / Std / NI / NA**  
 Eng/No: \_\_\_\_\_  
 C/No: **MH3SG4620LJ077231**  
 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: **120/70-14**  
 R: **140/70-14**

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

| Front  |             | Rear   |                   |
|--------|-------------|--------|-------------------|
| R/Bal. | <b>5</b> mm | R/Bal. | <b>5</b> mm       |
| L/Bal. | <b>5</b> mm | L/Bal. | <b>5</b> mm       |
| D.O.A. | _____       | D.O.I. | <b>06-09-2021</b> |

Survey held at **W/S** **2:20PM**

Des. of Damages : Frt / ☒ Rea / ☒ O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

| Date / Time | Action / Instruction |
|-------------|----------------------|
|             | NO GIA PROVIDED      |
|             |                      |
|             | \$3000 - \$4000      |
| 07/09/21    | Submit PRS.          |
|             |                      |
|             |                      |
|             |                      |
|             |                      |

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

1) 07/09 Typist ☐ : Final Report

Date/Time, File Return to?

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

Days Of Repair: **3**

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

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

☐ : Interview (\$ \_\_\_\_\_)

☐ : Tech. Insp (\$ \_\_\_\_\_)

☐ : W/Weekend (\$ \_\_\_\_\_)

Survey Fee:

Transportation:

\_\_\_\_\_ \$ + RS. \_\_\_\_\_ SI

Photos

Other:

TOTAL

Report Filed: **MER-PRS**

Long Cond / MPB /