PRS Filed By: GQ | REF: CS3/III21009366/Gqf3

PRS

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s BLUWEL AUTO

of

Insured:

Policy No.

Claims No. MFL2021D0003873

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

Bal. or Market Value: $82k

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 5 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: SMP5637S Yr Regn: 30 Sep/2019

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

Make: HONDA SHUTTLE HYBRID 1.5 c.c 1496

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

Sp.Reading 237024 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: GP72007377

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: 185/60R15 FIRENZA

R: 185/60R15 FALKEN

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

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm
D.O.A.		D.O.I.	07-09-2021

Survey held at W/S 3:30PM

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
	$4000 - $5000
08/09/21	Submit PRS.
19/10/21	Submit LS $4800, 5 days (Red $900, 16%)

Date/Time, File Pass to?

1) 19/10 Typist

Date/Time, File Return to?

2)

☐ : Preli. Report

☐ : Final Report

Days Of Repair: 5

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Invs ($)

☐ : Weeland ($)

Report Format: MER-TP

Lump Sum / ~~Hrly~~: 4800

Survey Fee:

Transportation: S + RS. SI

Photos

Other:

TOTAL