

Ref: REC. BY:

Steve

Ref:

CS3/ASM21011089/Eug3

ASSIGNMENT

From:

PRS

Date:

Estimated Cost:

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

To Inspect Vehicle No: SLK 7821B

at Workshop m/s

of

Insured:

SHD 3673Y

Policy No.

Claims No.

S1M03L0K

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: \$61K

IDAC Accident Report: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 5 days Res.: Yes or No

Lum Sum: % 3-Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: Person Contacted:

Vehicle: IN / OUT

Veh No:

SLK 7821B

Yr Regn:

1

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

Truck / Trailer or

Make:

Honda Vezel

c.c.

1496

Colour:

Blue

A/C: Insured / Std / NI / NA

Sp. Reading

147847

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

R41-1297225

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

215/60R16

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

4

mm

R/Bal.

4

mm

L/Bal.

4

mm

L/Bal.

4

mm

D.O.A.

26/10/21

D.O.I.

29/10/21

Survey held at

Wei Car Spray

Des. of Damages: Frl / Rear / O/S / NIS / UIC / Roof/top or

The UIC / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

No GIA report

Repa: range 4R - 5R
5 days

1/11/2021 Submit PRS.

Date/Time, File Pass to?

☐

: Procl. Report

1/11 TYPIST

☐

: Final Report

Date/Time, File Return to?

Days Of Repair:

5

Resurvey No. of Trip:

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Insp (\$

☐

: Wash and

Survey Fee:

Transportation:

\$ + RS. \$

Finals

Others

Total

Report Form: SMART CLAIM - PRS

Date/Time, File Return to?