

PRS

ASSIGNMENT

Date: \_\_\_\_\_

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

To Inspect Vehicle At: \_\_\_\_\_

at Workshop with: \_\_\_\_\_

Report No. SMW 9760E

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

Claims No. S1M03NOE

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

(Claim's Record)

Make of Vehicle: \_\_\_\_\_

(Policy Condition)

Remarks: The vehicle commenced its repair at the time of inspection.

Dist. or Market Value: \_\_\_\_\_

ICAC Accident Report Consistently: Yes or No

DIA / PR Seen Consistently: Yes or No

Est. Receipt days Res. Yes or No

Claim Sum % V. Yes or No

QA / REV / REP. / 24 HRS

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

Vehicle FBR 919 G Year 24/2/20

Type: Motor Cycle / Bus / Van / Lorry / Trailer / Pedal Motor

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

Make: Yamaha R3 No. 377

Colour: Black A/O: Insured / Not Insured

Sp. Reading 10186 YR. Insured / Not Insured

Chassis No. MH3RHT2D-000007479

Gen. Cond: Good / Fair / Poor / Worst

Steering: Good / Jammed / Locked / Burnt or

Brakes: Good / Jammed / Locked / Burnt or

Model: M1 / 2 / 3 / 4 / 5 / 6 / 7 / 8 / 9 / 10 / 11 / 12 / 13 / 14 / 15 / 16 / 17 / 18 / 19 / 20 / 21 / 22 / 23 / 24 / 25 / 26 / 27 / 28 / 29 / 30 / 31 / 32 / 33 / 34 / 35 / 36 / 37 / 38 / 39 / 40 / 41 / 42 / 43 / 44 / 45 / 46 / 47 / 48 / 49 / 50 / 51 / 52 / 53 / 54 / 55 / 56 / 57 / 58 / 59 / 60 / 61 / 62 / 63 / 64 / 65 / 66 / 67 / 68 / 69 / 70 / 71 / 72 / 73 / 74 / 75 / 76 / 77 / 78 / 79 / 80 / 81 / 82 / 83 / 84 / 85 / 86 / 87 / 88 / 89 / 90 / 91 / 92 / 93 / 94 / 95 / 96 / 97 / 98 / 99 / 100

Tyre Size: 110/70 R17

Front: 4 mm Rear: 4 mm

Wheel: 110/70 R17 mm

D.O.A. 5/12/21 Bikers Avenue 8/12/21

Survey held at \_\_\_\_\_

Dist. of Damages: Front / Rear / Side / Wing / Roof / Other

The W/O / CHASSIS frame / Body structure affected due to collision

Date/Time	Action/Instruction
	<u>MV-15K</u> <u>Repair range: 3K-4K</u> <u>3 repair days</u>
<u>9/12/21</u>	<u>Submit PRS, repair range \$3,000-\$4,000</u>

Days Of Repair: 3

Resurvey No. of Trips: \_\_\_\_\_

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

Transportation: \_\_\_\_\_

Food: \_\_\_\_\_

Other: \_\_\_\_\_

NET TOTAL: \_\_\_\_\_

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

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

Wash. Invo (\$ \_\_\_\_\_)

Washband (\$ \_\_\_\_\_)

9/12/21-typist