

PRS

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD ☒ TP ☒ /S / TP RES / OD RES / EVA / INV / MV
 To inspect Vehicle No: _____
 at Workshop m/s **LLH CAR SERVICES & PANEL BEATING WORKSHOP**
 of _____
 Insured: _____
 Policy No: _____
 Claims No: **S1M03OVC**
 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: **\$148k**
 IDAC Accident Rpt: _____ 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

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: **SJM7026T** Yr Regn: **27 Jun/2019**
 Type ☒ M.Car ☐ M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: **VOLKSWAGEN GOLF GTI 2.0** c.c **1984**
 Colour **White** A/C: **Insured / Std / NI / NA**
 Sp.Reading **56463** T/Radio: **Insured / Std / NI / NA**
 Eng/No: _____
 C/No: **WVWZZZAUZKW112961 ***
 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: **225/40ZR18**
 R: **225/40ZR18**

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. 22-12-2021	

Survey held at **W/S** **12PM**

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

23/12/21@3.28pm revised to Vale Oh via Smart Claims.

23/12/21 Submit PRS.

Date/Time, File Pass to?

☐ : Preli. Report
☐ : Final Report

1) 23/12 Typist

Date/Time, File Return to?

2)

Days Of Repair: **5**

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp (\$ _____)

☐ : Interview (\$ _____)

☐ : Tech. Insp (\$ _____)

☐ : A/Weekend (\$ _____)

Survey Fee:

Transportation:

____ \$ + RS. ____ SI

Photos

Other:

TOTAL

Report Filed: **SMART CLAIMS - PRS**

Long Cond / MPB