

PRS

ASSIGNMENT

From:

Date:

Veh No:

SLZ2950R

Yr Regn: 27 Apr/2018

Estimated Cost:

Type ☒ M.Car ☐ M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /OD ☒ TP ☐ N/S / TP RES / OD RES / EVA / INV / MV

Truck / Trailer or

To inspect Vehicle No:

Make:

MAZDA 6

c.c 1998

at Workshop m/s

VIN'S MOTOR

Colour

Blue

A/C: Insured / Std / NI / NA

of

Sp.Reading

45132

T/Radio: Insured / Std / NI / NA

Insured:

Eng/No:

Policy No.

C/No:

JM6GL1071J0147031

Claims No.

Gen. Cond

☒ Good ☐ Fair / Poor / Burnt

Sum Insured:

Excess:

Steering:

☒ Inorder ☐ Jammed / Leaked / Burnt or

(Client's Record)

Brake:

☒ Inorder ☐ Jammed / Leaked / Burnt or

Make of Veh:

Modi:

Nil / S/Rim / ☒ STD A/Rim or

(Policy Condition)

N/S	O/S

Remark: The veh had commenced its
repair at the time of inspection.

Tyre Size:

F: 225/55R17

R: 225/55R17

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

TOYO / YOKO or

Bal. or Market Value: \$77k

Front

Rear

IDAC Accident Rpt:

Consistent? : Yes or No

R/Bal.

6

mm

R/Bal.

6

mm

GIA / PR Seen:

Consistent? : Yes or No

L/Bal.

6

mm

L/Bal.

6

mm

Est. Repairs:

3

days

Res.: Yes or No

D.O.A.

D.O.I.

29-12-2021

Lum Sum:

20

%

3 Val.: Yes or No

Survey held at

W/S

4:30pm

CA / REV / REP. / 24 HRS

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

Date:

Person Contacted:

Vehicle: IN / OUT

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

Date / Time

Action / Instruction

\$2000 - \$3000

Date/Time, File Pass to?

☐

: Preli. Report

1)

Date/Time, File Return to?

☐

: Final Report

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:

☐

: Site Insp (\$

3 + RS. SI

☐

: Interview (\$

Photos

☐

: Tech. Insp (\$

Other:

☐

: W/Weekend (\$

TOTAL

Report Filed:

Long Cond / MPB: