PRS Filed By: GQ REF: CS3/CTI22000889/Gvy3

PRS

ASSIGNMENT

From: Date:

Estimated Cost:

OD / TP / N/S / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

at Workshop m/s GARAGE 13

of

Insured: CB 7554B

Policy No. DMB1SNW00011502102

Claims No. SNM22D200610/C02/TANCHC

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: $100k

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 4 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: SKD3630K Yr Regn: 10 May/2011

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

Make: B.M.W. 335I 3.0L c.c 2979

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

Sp.Reading 130847 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: WBADX72040E668399 *

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: 235/35ZR19

R: //

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. 23/1/22 D.O.I. 25-01-2022

Survey held at W/S 4:30pm

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

O/S FRONT

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

Date / Time	Action / Instruction
	$4000 - $5000
26/1/22	Submit PRS,repair range $4,000-$5,000

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2) 26/1/22-typist

Report Format:

Lump Sum / UPD:

☐ : Preli. Report

☐ : Final Report

Days Of Repair: 4

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Invs ($)

☐ : Weekend ($)

Survey Fee:

Transportation: S + RS. SI

Photos

Other:

TOTAL