PRS Filed By: GQ REF: CS3/GRB21008473/Gvy3-1

PRS

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s D MOTORWERKZ

of

Insured: SLJ 7951P

Policy No.

Claims No. MFL2021D0003327

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: $136k

IDAC Accident Rport: 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

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SLL6688X Yr Regn: 15 Nov/ 2016

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

Make: MERCEDES BENZ GLC250 c.c 1991

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

Sp.Reading 115810 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: WDC2539462F100187

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Jammed / Leaked / Burnt or

Brake: Jammed / Leaked / Burnt or

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

Tyre Size: F: 235/55R19

R: 235/55R19

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or CONTINENTAL

Front		Rear	
R/Bal.	6 mm	R/Bal.	6 mm
L/Bal.	6 mm	L/Bal.	6 mm

D.O.A. 3/8/2021 D.O.I. 13-08-2021

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
16/8/21	Submit PRS
7/4/22	Submit LS $4150 (red 4450, 51%)

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2) 7/4/22-typist

: Preli. Report

: Final Report

Days Of Repair: 5

Resurvey No. of Trip:

Add Fee: : Site Insp ($)

: Interview ($)

: Tech. Invs ($)

: Weekend ($)

Survey Fee:

Transportation: S + RS. SI

Photos

Other:

TOTAL

Report Format:

Lump Sum / UPD: