

(08/11/13) wef

ASS. REC. BY:

REF:

CS3/LPC 22005311/Ray3

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No: 9LF 8815P

at Workshop m/s Hwa Penh Auto

of 38, Wundwin RD #06-03

Insured:

LPC

Policy No.

Claims No. 22/22/22/VC05/025884

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:

IDAC Accident Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

Veh No:

9LF 8815P

Yr Regn:

/

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

Truck / Trailer or

Make:

Honda SHUTTLE

C.C

Colour

GREY

A/C: Insured / Std / NI / NA

Sp. Reading

093347

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

4K81005695

Gen. Cond: Good / Fair / Poor / Burnt

Steering: (norder) / Jammed / Leaked / Burnt or

Brake: (norder) / Jammed / Leaked / Burnt or

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

Tyre Size:

F:

195/60R15

R:

7-

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.

02/06/22

D.O.I.

02/06/22

Survey held at

Hwa Penh

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

N/S REAR

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

Date / Time Action / Instruction

18/07/22 Submit PRS.

Date/Time, File Pass to?



: Prell. Report



: Final Report

1) 18/07 Typist

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

) S + RS, SI

) Photos

) Others

TOTAL

Add Fee:



: Site Insp (\$



: Interview (\$



: Tech. Invs (\$



: Weekend (\$

Report Format : PRS

Lump Sum / I.B.I. (\$