

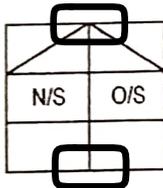
PRS

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 QD TP / S / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/s: SPEEDWERKZ
 of _____
 Insured: _____
 Policy No: _____
 Claims No: TAX/03/22/2035
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

Veh No: SKV9845Z Yr Regn: 13 Oct/2015
 Type M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: NISSAN / SYLPHY 1.6 c.c. 1598
 Colour: Grey A/C: Insured / Std / NI / NA
 Sp. Reading: 59311 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: MNTBBAB17Z0024767 *
 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: 195/60R16
 R: //

(Policy Condition)



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

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

Bal. or Market Value: \$44k
 IDAC Accident Rpt: _____ Consistent?: Yes or No
 GIA / PR Seen: _____ Consistent?: Yes or No
 Est. Repairs: 12 days Res.: Yes or No
 Lum Sum: 20 % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Front W/S 12PM
 R/Bal. 6 mm R/Bal. 6 mm
 L/Bal. 6 mm L/Bal. 6 mm
 D.O.A. _____ D.O.I. 17-03-2022
 Survey held at _____
 Des. of Damages: Frt / Rea / O/S / N/S / U/C / Rooftop or _____
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	\$8000 - \$10000
21/03/22	Submit PRS.
03/08/22	Submit LS \$8900, 12 days (Red \$2750, 24%0

Date/Time, File Pass to? : Preli. Report
 : Final Report
 1) 03/08 Typist
 Date/Time, File Return to?

Days Of Repair: 12
 Resurvey No. of Trip: _____

Report Fee: TP
 Lump Sum: 8900

Add Fee: : Site Insp (\$ _____)
 : Interview (\$ _____)
 : Tech. Invs (\$ _____)
 : Travel end (\$ _____)

Survey Fee:	
Transportation:	
3 + RS. SI	
Photos	
Other:	
TOTAL	