

ASSIGNMENT:

From: PRS Date: _____
 Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/s _____
 of _____
 Insured: _____
 Policy No. _____
 Claims No. CLMOMVC000004193
 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 Report _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 3 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: FBT 7351L Yr Regn: _____
 Type: M/Car / M/Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: Yamaha ~~MAX~~ NMAX c.c. 155
 Colour: Blue A/C: Insured / Std / NI / NA
 Sp. Reading: 2708 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: MH386568 ONK 136012
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or _____
 Brake: Inorder / Jammed / Leaked / Burnt or _____
 Mod: Nil / S/Rim / STD A/Rim, or _____
 Tyre Size: F: 110/70-13
 R: 130/70-13
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or _____

Front _____ Rear _____
 R/Bal. 4 mm R/Bal. 4 mm
 L/Bal. _____ mm L/Bal. _____ mm
 D.O.A. _____ D.O.I. 14/7/22
 Survey held at M1 motorway
 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
	<u>No GIA report</u>
	ESTIMATE RANGE OF COR \$2000-\$3000.
27/07/22	Submit PRS.

Date/Time, File Pass to?

1) 27/07 Typist

Date/Time, File Return to?

2)

Report Format: PRS

Lump Sum / L.B.J. (\$) _____

Days Of Repair: 3

Resurvey No. of Trip: _____

Add Fee:

☐ : Site Insp (\$ _____)
☐ : Interview (\$ _____)
☐ : Tech, Invs (\$ _____)
☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

S + RS \$ _____

Photos

Others

TOTAL