PRS Filed By: GQ REF: CS3/ASM22007684/Gvy3

PRS

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s Garage 13

of

Insured: SHA 8812X

Policy No.

Claims No. S2M048LL

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: $54k

IDAC Accident Rport: 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

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SMU4889L Yr Regn: 16 Jul/2015

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

Make: AUDI A3 SEDAN 1.4 c.c 1395

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

Sp.Reading 70848 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: WAUZZZ8V1F1139149 *

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: 205/55R16

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. 10/8/2022 D.O.I. 12-08-2022

Survey held at W/S 3:30PM

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

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

Date / Time	Action / Instruction
	$10000 - $12000
15/8/22	Submit PRS, repair range $10,000-$12,000

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2) 15/8/22-typist

☐ : Preli. Report

☐ : Final Report

Days Of Repair: 12

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 / LPO: