| ASS. REC. BY: Steve 1 (S3/ASM))006,296/EV43 +1 | |
|--|---|
| From: PRS Date: | Veh No: GBE 51508 Yr Regn: 22/12/15 |
| Eslimated Cost: | Type: M.Car / M.Cycla / Bus / Van / Lordy / Taxi / Prime Mover / |
| OD TPJWS/TP RES/OD RES/EVA/INV/MV | Truck / Traller or |
| To Inspect Vehicle No: | Make: Tayota Dum 150 c.c 7987 |
| at Workshop m/s | Colour Manage A/C: Insured / Std / NI / NA |
| of | Sp.Reading 273049 T/Radio: Insured / Std / NI / NA |
| Insured: XD 9087K | Eng/No: |
| Policy No. GA457281 | C/No: J1FAT35 490X 109688. |
| Claims No. S2M045OI | Gen. Cond: Good / Fair / Poor / Burnt |
| Sum Insured: Excess: | Steering: In order / Jaimmed / Leaked / Burnt or |
| (Client's Record) | Brake: Inorde / Jammed / Leaked / Burnit or |
| Make of Veh: | Modi: Nii /S/Rim / STO A)Rim or 1958/5C |
| | Tyle Size. |
| (Policy Condition) | R: // BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / |
| Remark: The veh had commenced its N/S O/S | |
| repair at the time of inspection. | TOYO I YORO or Rear |
| Bal. or Market Value: | Front R/Bal. mm R/Bal. mm |
| IDAC Accident Rport: Consistent? : Yes or No | UBal. U mm UBal. U mm |
| GIA / PR Seen: Consistent? : Yes or No | D.O.A. 19/6/22 V.O. D.O.I. 1/1/19 |
| Est Repairs: days Res.: Yes or No | Survey held at |
| Lum Sum: % · 3 Val.: Yes or No | Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop of |
| CA / REV / REP. / 24 HRS | |
| CA / REV / REP. / 24 HRS Vehicle: IN/O | The U/C / Chassis frame / Body Structure affected due to collision. |
| Date: | |
| | range 7k - 8k |
| $\frac{10 \text{ day}}{10 \text{ day}}$ | |
| | |
| 6/7/22 Submit PRS, repair range \$7,000-9 | \$8,000 |
| | |
| 6/9/22 Submit LS \$16,550 (Red 17,800, 5 | 1%) |
| | |
| Days Of Repair: 20 | |
| Osleftime, File Pass 107 Survey Fee. | |
| (1) Final Report | i a se si |
| Date/Time, File Return to? | Fee: Site Insp |
| 2) 6/9/22-typist | : Interview (\$) Photos : Tech, Invis (\$) Others |
| Royal Formet: | Weekend (s |
| Lump Sum / LE.I: (#) | TOTAL |
| | : |