

PRS

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/s RELIABLE CARZ
 of _____
 Insured: _____
 Policy No: _____
 Claims No: _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

Veh No: SMN8821S Yr Regn: 30 Aug/2019
 Type M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: TOYOTA VOXY HYBRID c.c 1797
 Colour Black A/C: Insured / Std / NI / NA
 Sp Reading 257608 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: ZWR800400137
 Gen. Cond Good / Fair / Poor / Burnt
 Steering: norde / Jammed / Leaked / Burnt or
 Brake: norde / Jammed / Leaked / Burnt or
 Modi: Nil / S/Rim / STD A/R or _____
 Tyre Size: F: 195/65R15
 R: //

(Policy Condition)
 Remark: **The veh had commenced its repair at the time of inspection.**

<input type="checkbox"/>	<input type="checkbox"/>
N/S	O/S
<input type="checkbox"/>	<input type="checkbox"/>

Bal. or Market Value: \$142k
 IDAC Accident Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 3 days Res.: Yes or No
 Lum Sum: 20 % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____ Vehicle: IN / OUT

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

Front	Rear
R/Bal. <u>6</u> mm	R/Bal. <u>6</u> mm
L/Bal. <u>6</u> mm	L/Bal. <u>6</u> mm
D.O.A. _____	D.O.I. <u>27-09-2022</u>
Survey held at _____	W/S <u>3:30PM</u>

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
FRONT O/S
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	\$4000 - \$5000
05/12/22	submit prs -repair range: \$4k-\$5k and 3 days

Date/Time, File Pass to? : Preli. Report
 : Final Report
 1) 05/12/22
 Date/Time, File Return to?

Days Of Repair: 3
 Resurvey No. of Trip: _____

Report Period: PRS
 Lump Sum / MP/...

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

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