

PRS

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s EQUATOR BROTHERHOOD

of

Insured:

Policy No:

Claims No:

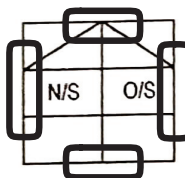
Sum Insured: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value: \$5000

IDAC Accident Rpt: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 5 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: FY1841E

Yr Regn: 06 Jul/2004

Type: M.Car / ☒ M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: HONDA WAVE 125I c.c 125

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

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

Eng/No:

C/No: NF125MS0003603 *

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: 70/90-17 DUN

R: 80/90-17 TIMSUN

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal. 5 mm

R/Bal. 5 mm

L/Bal. mm

L/Bal. mm

D.O.A.

D.O.I. 20-10-2022

Survey held at

W/S

4PM

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

\$4000 - \$5000

01/03/23 submit prs / repaie range: \$4k-\$5k and 5 days

Date/Time, File Pass to?

☐

: Preli. Report

1) 01/03/23

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: 5

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp (\$

☐ : Interview (\$

☐ : Tech. Insp (\$

☐ : Meet end (\$

Survey Fee:

Transportation:

3 + RS. SI

Photos

Other:

TOTAL

Report Final:

Lum Sum / U/C: