(96/13 S) SMI

ASS. REC. BY: PRS

REF: CS3/MSG22010552/Sny3

# ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s Providence Automobile

of _____

Insured: MSIG

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.

| N/S | O/S |
|---|---|
| | |

Bal. or Market Value: $45K

IDAC Accident Rport: _____ 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 Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: SJC3921M Yr Regn: 15 FEB 2008

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

Make: Toyota axio c.c 1496

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

Sp.Reading 137194 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: NZE141604883

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: 185/70R14

R: 185/70R14

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

| Front | | Rear | |
|---|---|---|---|
| R/Bal. | 5 mm | R/Bal. | 6 mm |
| L/Bal. | 5 mm | L/Bal. | 6 mm |
| D.O.A. | 19/10/22 | D.O.I. | 26/10/22 |

Survey held at Providence Automobile

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 |
|---|---|
| | est Repair cost = $2000 - $3000 /- |
| 31/10/22 | submit PRS report/ ~~repair range 2k-$3k~~ |

Yearly: 8600

MV: 45K

NV: 23K

Date/Time, File Pass to?

1) 31/10/22 ☐ : Preli. Report ☐ : Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: 3

Resurvey No. of Trip: _____

Add Fee: ☐ : Site Insp ($ _____) ☐ : Interview ($ _____) ☐ : Tech. Invs ($ _____) ☐ : Weekend ($ _____)

Survey Fee:

Transportation: ___S + RS.___SI

Photos

Others

TOTAL

Report Format : _____

Lump Sum / I.B.I: ($ PRS )