ASS. REC. BY: STEVE CS3/ASM 22004006/EtyB	
ASSIGNMENT	
Front: Date:	Veh No: SMY 6 204D Yr Regn: 18/3/2/
Estimated Cost:	Type: M.Car M.Cycle / Bus / Van / Lorry / Taxl / Prime Mover /
OD INTPI WS ITP RES I OD RES I EVA I INV I MY	Truck / Trailer or
To Inspect Vehicle No:	Make: Handa CIVIC co 1507
at Workshop m/s	Colour Grey AC: Insured/Std/NI/NA
of	Sp.Reading // T/Radio: Insured/Std/NI/NA
Insured:	Eng/No:
Policy No.	C/NO: MRHFC5650LT000561.
Claims No.	Gen. Cond: Good / Fair / Poor / Burnt
Sum Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
Make of Veh:	Modi: Nil / S/Rim / STD A/Rim or
-	Tyre Size: F: 915/55R16
(Policy Condition)	R://
Remark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO I YOKO OF JANKCEK
Bal. or Market Value:	<u>Front</u> <u>Rear</u>
IDAC Accident Rport: Consistent? : Yes or No	R/Bal. 5 mm , R/Bal. 5 mm
GIA / PR Seen: Consistent? : Yes or No	L/Bal. 45 mm UBal. 5 mm
Est Repairs: days Res.: Yes or No	D.O.A. 15/4/1/2 DIS D.O.I.
Lum Sum: % · 3 Val.: Yes or No	Survey held at 15 5 Harter 1100 (E
CA / REV / REP. / 24 HRS Vehicle: IN / OUT	Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
Date: Person Contacted:	The U/C / Chassis frame / Body Structure affected due to collision.
Date / Time Action / Instruction Repair Value 1 K - St	
MY-1134.	
10 days	
SUBMIT PRS REPORT	
21/1∯2022 Submit L/S \$8,600.00 @ 10 days (Red \$4,700.00/ 35%)	
Dale/Time, File Pass to? : Prell. Report Days Of Repair:	
	Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?	Transportation:
2 Add Fee	: Site Insp (\$)_s+Rssi
	: Interview (\$) Photos
Reput Format :	: Tech, Invs (\$) Others
Lump Sum / L.B.J: (%	:Weelend (*)
	TOTAL