

ASS. Fee: BY:

GQ

REF:

CS3/LPC22003525/Gty3

PRS

ASSIGNMENT

From:

Date:

Estimated Cost:

OD ☒ TP ☒ N/S ☐ TP RES ☐ OD RES ☐ EVA ☐ INV ☐ MV

To Inspect Vehicle No:

at Workshop m/s A-TEC AUTO

of

Insured:

Policy No:

Claims No:

Sum Insured:

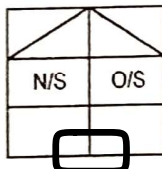
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

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:

SND7154G

Yr Regn:

20 Jan 2022

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

Truck / Trailer or

Make:

HONDA / SHUTTLE 1.5G

c.c

1496

Colour

Black

A/C:

Insured / Std / NI / NA

Sp. Reading

4649

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

GK82202075

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:

- 185/60R15

R:

// 185/60R15

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

D.O.I.

26-04-2022

Survey held at

W/S

2:30PM

Des. of Damages: Frt /

☒ Real

/ O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

GIA give later

SUBMIT PRS REPORT

\$2000 - \$3000

NO GIA ONLY HAVE SKETCH PLAN

06/01/2023 Submit L/S \$3,350 @ 05 days (Red \$15,850.00 @ 5 days)

Date/Time, File Pass to?



Preli. Report

1)



Final Report

Date/Time, File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Weekend (\$

Survey Fee:

Transportation:

3 + RS. SI

Photos

Other:

TOTAL

Report Filed:

Long. Cons. / MPB: