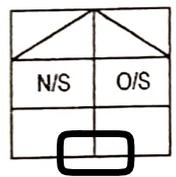


PRR ASSIGNMENT
CS3/LPC22000769/Gtf3

From: _____ Date: _____
 Estimated Cost: _____
 QD TP / S / TP RES / OD RES / EVA / INV / MV
 To inspect Vehicle No: _____
 at Workshop m/s Teck Siang Motor
 of _____
 Insured: _____
 Policy No. _____
 Claims No. _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

Veh No: SY9311L Yr Regn: 12 Aug 2015
 Type M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trailer or _____
 Make: MERCEDES BENZ C180 c.c. 1595
 Colour: Silver A/C: Insured / Std / NI / NA
 Sp. Reading: 107437 T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: WDD2050402R083591 *
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: Inorder / Jammed / Leaked / Burnt or
 Brake: Inorder / Jammed / Leaked / Burnt or
 Modi: Nil / S/Rim / STD A/R or _____
 Tyre Size: F: 225/50R17
 R: //

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



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

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>24-01-2022</u>	
Survey held at _____		W/S _____ 1PM	

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

Bal. or Market Value: \$80k
 IDAC Accident Rpt: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: 3 ~~4~~ days Res.: Yes or No
 Lum Sum: 20 % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Date / Time	Action / Instruction
	\$3000 \$4000
	submit PRR Report
03/01/23	submit lump sum: \$2700 and 3 days (red, \$1100, 29%)

Date/Time, File Pass to? : Preli. Report
 1) 03/01/23 : Final Report
 Date/Time, File Return to? _____
 2) _____
 Report Fee: _____
 Lump Sum / MPB: 2700

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

Add Fee: : Site Insp (\$ _____)
 : Interview (\$ _____)
 : Tech. Insp (\$ _____)
 : Wash and (\$ _____)

Survey Fee: _____
 Transportation: _____
 3 + RS, SI
 Photos
 Other:
 TOTAL