

Smy

REF:

CS3/III23000544/Sny3

ASS. REC. BY:

PRS

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / IP / WS / IP RES / OD RES / EVA / INV / MV
 To Inspcd Vehicle No: _____
 at Workshop m/s _____
 ol _____
 Insured: III
 Policy No. _____
 Claims No. _____
 Sum Insured: _____ Excess: _____
 (Client's Record)
 Make of Veh: _____

Veh No: SNA838/B Yr Regn: 09 Oct 2019
 Type: MCdr / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
 Truck / Trallor or
 Make: Toyota SUPRA c.c. 2997
 Colour: White
 Sp. Reading: 37590
 Eng/No: WZ10B42060W025547
 C/No: _____
 Gen. Cond: Good / Fair / Poor / Burnt
 Steering: In order / Jammed / Locked / Burnt or
 Brake: In order / Jammed / Leaked / Burnt or
 Modl: NII / S/Rlm / STD / Rlm or
 Tyre Size: F: 275/35 R19
 R: 275/35 R19
 BS / DUN / EXNOVA / GY / FS / LIZA / VIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or
 Front: _____ mm
 R/Bal. 6 mm
 L/Bal. 6 mm
 D.O.A. 10/12/22
 Survey held at monster garage
 Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or
 The U/C / Chassis frame / Body Structure affected due to collision.

(Policy Condition)
 Remark: The veh had commenced its repair at the time of inspection.
 Bal. or Market Value: \$263K
 IDAC Accident Rpt: _____ Consistent? : Yes or No
 GIA / PR Secn: _____ Consistent? : Yes or No
 Est. Repairs: 3 days Res: Yes or No
 Turn Sum: _____ % 3 Val: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____
 Vehicle: IN / OUT

Date / Time	Action / Instruction
10/02/23	submit PRS

Date/Time, File Pass to? ☐ : Prel. Report
☐ : Final Report
 1) 10/02/23
 Date/Time, File Return to? 2)
 Report Format: PRS
 Lump Sum / I.B.I. (\$) _____

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 _____

Balance: 81.9m
 yearly: 23K
 mv: 263K
 nv: 183K