

MOTOR REPORT NO.

DATED:

PRE-INSURANCE INSPECTION REPORT

DETAILS OF PROPOSAL:

Insurer Co. Name :
Division / Branch Name :

Name of Underwriter :
Request Date & Time : Timing :
Insured Name :
Insured Contact No. :
Insured Address :

Contact Persons Name :
Contact Numbers :
Insured CNIC No. :

DETAILS OF VEHICLE:

Manufacturer :
Make :
Horse Power :
Variant :
Registration No. :
Registration Year :
Manufacturing Year :
Engine No. :
Chassis No. :
Cubic Capacity :
Color :
ODO Meter Reading :
Body Type :
Private or Commercial :
Local Assembled or Importe :

ACCESSORIES DESCRIPTION:

Factory Fitted Accessories :
Any Additional Accessories :

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BODY OBSERVATIONS:

Damages / Scratches :

Missing Factory Fitted Items :

Any Other Alterations :

INSURED ESTIMATE VALUES (I.E.V):

Vehicle Value :

Value of Additional Accessorie :

SURVEYOR DETAILS:

Name of Surveyor :

Place of Inspection :

Date & Time of Inspection :

Timing :

RECEIVING OF IMPORTANT DOCUMENTS:

Copy of Reg-Book (Existing Owner) :

Brand New Vehicle Copy of Sale Invo :

Copy of CNIC of Insured :

Copy of Import Documents :

Bill of Entry, Bill of Lading, :

Importers Invoice

ISSUED WITHOUT PREJUDICE

For Prism Surveyors (Pvt) Ltd.