

REF: CS/LAW24110127/XXp3 (GBC 8781L)

Special Instruction:

ASSIGNMENT (Office)

From (Person): VITHY of KELVIN CHIA PARTNERSHIP Date/Time: 04/11/2024

Estimated Cost: _____ Bill to: _____

L/SUM: 6700 / REPAIR: 6 WORKING DAYS

Third Parties:

Claimant: ~~IMPACT ANALYSIS~~
Survivor: CONSULTING

Workshop: ECO AUTOMOBILES

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: GBC 8781L

Insured: GBG 2749A

at Workshop m/s ECO AUTOMOBILES

Tel:

of 15 KAKI BUKIT ROAD 4 #01-53 BARTLEY

Policy No:

Claim No: NR/2023001190

Sum Insured:

Excess:

Make of Veh:

D.O.A. 29/03/2021

(Client's Record)

H.O.D. Endorsement/Date:

Date/Time: _____ Person Contacted: _____ Vehicle IN / OUT _____

Date/Time: _____ Confirmed with _____ Final Fig _____, ____ days (Red \$____/____%; Original ____ days)

Date/Time: _____ Submit Final Fig _____, ____ days (Red \$ _____ / ____%; Original ____ days)

[illegible]

Para(1) : Parts found not replaced (To highlight *R* or *UB*, *LR*, *Etc*)

| | |
|---|--|
| Para(2) : Comments on consistency of damages (Parts Not Consistent : NC) | |
|---|--|

Para(3) : Nett Value

Market Value : _____

Salvage Value : _____

Nett Value : _____

Inspected/
Evaluated by:

Fee Charged:

Basic & Add

Transport

Photos

Others

Total

Date: _____

1) Date/Time _____ File Pass to _____

2) Date/Time _____ File Return to _____

3) Date/Time _____ File Pass to _____

4) Date/Time _____ File Return to _____

5) Date/Time _____ File Pass to _____

6) Date/Time _____ File Return to _____