

REF: CS1/SPF24080125/Eqp3 (SMF 3336B)

Special Instruction:

ASSIGNMENT (Office)

From (Person): Yap Ray Kai Joel of SPF Date/Time: 07/08/2024

Estimated Cost: _____ Bill to: _____

L/SUM: 4615.54 / REPAIR: 5 DAYS

Third Parties:

Claimant:

Surveyor: AIG Asia Pacific Insurance Pte. L

Workshop: PROGRESSIVE CAR CARE PTE LTD

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: SMF 3336B Insured: QX 604E

at Workshop m/s **PROGRESSIVE CAR CARE PTE LTD**

of BLK 3022A UBI ROAD 1 #01-45 SINGAPORE 048716

Policy No: _____ Claim No: ACS/105/009/2024/032 (CF)

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 05/07/2024

(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: _____

| Date/Time | | File Pass to | | File Return to | | Total |
|-----------|-----------|--------------|--------------|----------------|-----------|----------------|
| 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 |