22/03/2002

ASS. REC. BY: | REF: CS/FCI170131146/RIvbn2 | Special Instruction:

Surveyor :

## ASSIGNMENT (Office)

From (Person): CWS Joanne Yong of FCI Date/Time: 06072017 508pm

Estimated Cost: Bill to:

OD / ~~TP~~ / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No: PC 2438C Insured: SHD 47670

at Workshop m/s Sin Seng Tel: 68639595

of 3 Tech Park Crescent Tucas Tech Park

Policy No: Claim No: D1700660GMTSH

Sum Insured: Excess:

Make of Veh: D.O.A. 03072017
(Client's Record)

CA / REV / REP. / REV 24 HRS / DS

H.O.D. Endorsement:

Date/Time: 06072017 524pm Person Contacted: Susan Vehicle IN / OUT

| Date/Time | Action/Instruction ( ✓ ) Estimate |
|---|---|
| | PC 2438C - x |
| | SHD 47670 - x |
| 16/10/17 05.10pm | According to Susan tp vehicle Not In Yet. |
| 30.12.2017 226pm | Email to FCI temporary close file |
| 25/1/18 | Email preli revised to FCI |
| 16/3/18 | Rasul confirmed LS $ 5700 (Rec 6934.20, 54%) |

Est. Repairs: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

D.O.A. 03/07/11 D.O.I. 24/01/18

Survey held at SinSeng

Des. of Damages : Frt / ~~Rear~~ / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

| Date / Time | Action / Instruction |
|---|---|
| | |

RECEIVED 16 MAR 2018

Date/Time, File Pass to?

1) ☐ : Preli. Report

☐ : Final Report

Date/Time, File Return to?

2) 16/3 - typist

Days Of Repair: 6

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp ($ ) ☐ : Interview ($ ) ☐ : Tech. Invs ($ ) ☐ : Weekend ($ )

Report Format : CWS

Lump Sum / I.B.I: ($ 5700/2 )

2x15= 30

| | |
|---|---|
| Survey Fee: | 170+30 |
| Transportation: | 50 |
| S + RS SI | 50 |
| Photos | 50 |
| Others | |
| | |
| TOTAL | 350 |