

ASS. REC. BY:

REF: CS/MSG17018938/T16b m2

Special Instructions:

SURVIVOR

merimen

Taufik

ASSIGNMENT (Office)

From (Person):

Lionel Tan

of

MSG

Date/Time:

3/10/17 1:33pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLF6121 X

Insured:

SCH 9111B

at Workshop m/s

Performance Motor

Tel:

63190174

of

303 Alexandra Road, 159941

Policy No:

Claim No:

531587

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

2/10/2017

CA / REV / REP. / REV 24 HRS

'wp'

10-10-2017

H.O.D. Endorsement:

Date/Time:

3/10/17 2:00pm

Person Contacted:

Caroline

Vehicle IN / OUT

Date/Time

Action/Instruction

(✓)

Estimate Chua

SLF6121X - X

SCH 9111B - X

Confirm

\$3,212.40

3 days

(Red: 3569.20:52%)

Est. Repairs

days

Res:

Yes or No

Lump Sum

%

3 Val

Yes or No

CA / REV / REP. / REV 24 HRS

'wp'

Date

Person Contacted

Vehicle IN / OUT

Chua

Date Time

Action / Instruction

D.O.A.

Survey held at:

KML

Des. of Damages:

Fr

Rea

OIS

NIS

UIC

Rooftop or

The UIC / Chassis frame / Body Structure affected due to collision

RECEIVED 12 FEB 2018

12/2/2018

Date/Time File Pass to:

6/2 Typist

Date/Time File Return to:



Preli. Report



Final Report

Days Of Repair:

3

Resurvey No. of Trip:

1

Add Fee:



Site Insp (\$



Interview (\$



Tech Invs (\$



Weekend (\$

Survey Fee

Transportation

\$ - RS \$

Photos

Others

TOTAL

300

10

210

Report Format:

TP

Lump Sum / (B.I.): (\$

3212.40