22/03/2017

ASSI. REQ. BY: | REF: cs/EGI17021931/ Atb 02 | Special Instructions:

Surveyor: Adnan.

ASSIGNMENT (Office)

From (Person): Yeepei Li of EGI Date/Time: 16/11/17 @ 3.25pm

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SLL4680E Insured: PC6512U

at Workshop m/s Borneo Motors (Inch Cape) Tel: 98476209

of 17 Ubi Road 4

Policy No: Claim No: PC6512U/SE/p1

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A. 1/11/2017

CA / REV / REP. / REV 24 HRS 1wp 18.12.2017 @ morning. H.O.D. Endorsement:

Date/Time: 4.11pm @ 16/11/17 Person Contacted: Sam Vehicle: IN / OUT

Date/Time	Action/Instruction (✓ Estimate
	SLL4680E - X
	PC6512U - X
	Part by Part $3852.62 Cred. 6164.30 (61%)

Est. Repairs: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS (wp)

Vehicle: IN / OUT

Date: Person Contacted:

D.O.A. D.O.I. 18/12/17.

Survey held at Borneo Ubi.

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
	TP Ergo.

Date/Time, File Pass to?

1) 8/5 Typist

Date/Time, File Return to?

2)

☐ : Preli. Report

☑ : Final Report

Days Of Repair: 4

Resurvey No. of Trip: 1

Survey Fee:

Transportation:

Add Fee: ☐ : Site Insp ($) __$ + RS __SI

☐ : Interview ($) Photos

☐ : Tech. Invs ($) Others

☐ : Weekend ($)

TOTAL 350

Report Format : TP

Lump Sum / I.B.I: ($ 3852.62)