

ASS. REC BY

REF CS/LPC17024216/R1td302

Identification

Surveyor

Rasu

ASSIGNMENT (Office)

Menmen

From (Person)

Gerald Poh

of

LPC

Date/Time

21/12/17 @ 8:25am

Estimated Cost

Bill to

① / TP / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No:

SJN 4651C

Insured:

at Workshop in/s

Woon Meng Motor

Tel:

6316 1131

of

50 Bukit Batok Street 23 #01-06

Policy No:

Z174P05013207

Claim No:

17/17/17/VPO5/020273

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 12/12/2017

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

H.O.D. Endorsement

Date/Time: 10:51am @

Person Contacted:

Mrs. Heng

Vehicle: IN / OUT

Date/Time

Action/Instruction (✓) Estimate

SJN 4651C - CC4/LPC17023759/Uua3

D.O.A.: 12/12/17

22/12

revert via menmen

22/12 @

12:50pm inform by Chew Beng Kee authorise repair

22/12 @

2:45pm inform me Heng authorise repair excess \$0.

GIA / PR Seen

Est. Repairs:

days

Res.: Yes or No

D.O.A. 12/12/17

D.O.I. 21/12/17

Lum Sum:

%

3 Val.: Yes or No

Survey held at

Woon meng

CA / (REV) / REP. / 24 HRS

Des. of Damages (Fr) / Rear / O/S / N/S / U/C / Rooftop or

Date:

Person Contacted:

Vehicle: IN / OUT

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

Date / Time

Action / Instruction

Part by Part \$8570.05 + (Red: 2546.10 220%)

RECEIVED 20 APR 2018

Date/Time, File Pass to?

☐

Preli. Report

Days Of Repair:

8

170+15=185

185 x 20% = 37

1) 26/4 Typist

☒

Final Report

Resurvey No. of Trip:

1

Survey Fee:

185+37

Date/Time, File Return to?

Transportation:

50

2)

Add Fee:

☐

Site Insp (\$)

S + RS \$

50

☐

Interview (\$)

Photos

113

☐

Tech. Invs (\$)

Others

☐

Weekend (\$)

Report Format:

00

Lump Sum / (B): (\$ 8570.05)

TOTAL

03P  
3/5/18

435 + 10

445