ASS. REC. BY: REF: CS/FCI1800 1127/MHd3e2 Special Instruction:

MA

ASSIGNMENT (Office)

cws From (Person): Lurene Jaw of FCI Date/Time: 9.50am @ 18/01/18

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SLD 59202 Insured: SHB 3420X

at Workshop m/s: Cycle & Carriage Industries Tel: 9186 5112

of: 188 pandan loop

Policy No: Claim No: D18000342MFSH

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A. 14/01/2018

CA / REV / REP. / REV 24 HRS 1wp

Date/Time: 9.52am @ 18/1/18 Person Contacted: Alan H.O.D. Endorsement:

Vehicle: IN / OUT

Date/Time	Action/Instruction
	SLD 59202 - x
	SHB 3420X - CS/FCI1701599G/Tithe2 D.O.A: 16/08/2017
	Part by Part $14,130.96 (Rec'd: 1640.44 : 10%)

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. 14/1/2018 D.O.I. 18/1/2018

Survey held at

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

20/3/2018

RECEIVED 20 MAR 2018

Date/Time File Pass to? 1) 20/3 Typist

Date/Time File Return to? 2)

☐ : Preli. Report

☒ : Final Report

Days Of Repair: 8

Resurvey No. of Trip:

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

Report Format : TP

Lump Sum / I.B.I: ($ 14,130.96)

	5X15
Survey Fee:	170 175
Transportation:	50
Photos	50
Others	67
TOTAL	412

22/3/18