22/03/2002

ASS. REC. BY: | REF: CS/CTI18002509/ RI rd 3 02 | Special Instruction:

Surveyor : Merimen

ASSIGNMENT (Office)

From (Person): Jowyn Tay of CTI Date/Time: 6/2/18 @ 4:36pm

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SLB 4169T Insured: SJF 4000Z

at Workshop m/s Borneo Motors Tel: 66311857

of 2 pandan Crescent, 128462

Policy No: DMPCSN30 900061700 Claim No: SNM18D0067 3C02

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A. 5/2/18

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

H.O.D. Endorsement:

Date/Time: 10:09am @ 7/2/18 Person Contacted: thomas Vehicle IN / ~~OUT~~

Date/Time	Action/Instruction (✓) Estimate
	SLB 4169T-X
	SJF 4000Z-CCG/AIG12004429/Kb/a342 D.O.A: 24/02/18
7/3/18	Final fig $ 10,139.42 (Rec 7098.30, 41%) confirmed by email

Est. Repairs: 7 ~~10~~ 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. 05/02/18 D.O.I. 26/02/18

Survey held at Borneo motor

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 07 MAR 2018

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2) 7/3- typist

☐ : Preli. Report

☐ : Final Report

Days Of Repair: 7

Resurvey No. of Trip: 1

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

Report Format : merimen

Lump Sum / I.B.I: ($ 10,139.42)

Survey Fee:	
Transportation:	
$ + RS $	
Photos	
Others	220
TOTAL	