

22/03/2002

ASS. REC. BY:

REF:

CS/MSG18003111/4td3 72

Special Instruction:

Surveyor:

MARCUS

ASSIGNMENT (Office)

From (Person):

Christina Wong

of

MSG

Date/Time:

14/02/18 @ 3:06pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No.:

SLU 5070L

Insured:

SIX 7337M

at Workshop m/s

Kim Chwee

Tel:

6744 8183

of

Blk 1, Kaki Bkt Ave 6 # 01-106 Autobay

Policy No.:

28711069SMF

Claim No.:

549600

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

13/2/2018

CA / REV / REP. / REV 24 HRS

lwp

H.O.D. Endorsement:

Date/Time:

10:25am 3/5/2/18

Person Contacted:

Vehicle IN/OUT

Date/Time	Action/Instruction	Estimate	called no answer. wksp closed for CNY
	SLU 5070L - CC4/ASM18003047/eq3		D.O.A: 13/2/2018
	SIX 7337M - CS3/CA14023744/R/bu2		D.O.A: 21/12/2014

GIA / PR Seen:

Est. Repairs:

10

days

Res.: Yes or No

Lum Sum:

131

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN/OUT

Date:

Person Contacted:

D.O.A.

13/2/18

D.O.A.

11/2/18

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Rear & frt o/s.

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

Date / Time

Action / Instruction

GIA report wng LTA 49128 CNY 16-17 2ndth car

1st/4/18 confirmed final by #17028 with Alex (red: 25435.10 59%)

Date/Time, File Pass to?



: Preli. Report

1) 2014 Typist



: Final Report

Date/Time, File Return to?

2)

Days Of Repair:

10

Resurvey No. of Trip:

2

Add Fee:



: Site Insp (\$



: Interview (\$



: Tech. Invs (\$



: Weekend (\$

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

Report Format:

TP

Lump Sum / I.B.I.: (\$ 17028)

450

10

460