22/03/2002

ASS. REC. BY: | REF: CS/MSG18005238/Rlvd3 n2 Special Instruction:

Surveyor: Merimen Rasul

ASSIGNMENT (Office)

From (Person): Elaine Ngu of MSIG Date/Time: 20/3/18 @ 3:31pm

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SLF 7588B Insured: YN 7480G

at Workshop m/s Supercolors Tel: 67022737

of 8 kaki Bkt Ave 4 # 03-14

Policy No: 2869 6952 MKC Claim No: 552790

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A. 19/3/18

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

H.O.D. Endorsement:

Date/Time: 3.52pm @ 20/3/18 Person Contacted: Gwen Vehicle IN / OUT

Date/Time	Action/Instruction (✓ Estimate
	SLF 7588B - x
	YN 7480G - x
23/3/18	Send preli revised by merimen
24/4/18	Rasul confirmed LS $5100 (Red 4194.96, 45%)

Est. Repairs: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS lwp

Vehicle: IN / OUT

Date: Person Contacted:

D.O.A. 19/03/18 D.O.I. 21/03/18

Survey held at Supercolors

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

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

Date / Time	Action / Instruction

RECEIVED 3 0 APR 2018

Date/Time. File Pass to? ☐ : Preli. Report

1) ☐ : Final Report

Date/Time. File Return to?

2) 30/4 - typist

Days Of Repair: 8

Resurvey No. of Trip: 1

Survey Fee: 200

Transportation: 10

Add Fee: ☐ : Site Insp ($) S + RS SI

☐ Interview ($) Photos

☐ Tech. Invs ($) Others

☐ Weekend ($)

TOTAL 210

Report Format : Merimen

Lump Sum / I.B.I: ($ 5100/=)