

22/03/2002

ASS. REC. BY:

REF:

CS/MSG18007683 Albon2

Special Instruction:

Surveyor:
merimen

Rural

ASSIGNMENT (Office)

From (Person):

Lionel Tun

of

MSTH

Date/Time:

26/04/2018 9.16am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLJ 7069L

Insured:

SJM 48617

at Workshop m/s

Wearnes

Tel:

9818 7217

of

249 Alexandra Rd

Policy No:

27509443DMX

Claim No:

555 046

Sum Insured:

Excess:

Make of Veh:

D.O.A.

24032018

(Client's Record)

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

02/05/2018 @ after 10am

H.O.D. Endorsement:

Date/Time:

26/04/2018 11.14am

Person Contacted:

Steve

Vehicle IN / OUT

Date/Time

Action/Instruction (✓) Estimate

SLJ 7069L - X

SJM 48617 - CS3/MSG16008105 / Gch352 -1

D.O.A.: 27/04/2018

7/5/18

Send preli revised by merimen

CJR sum

22/5/18

21/5/18

Final fig \$ 2750 confirmed by email (Red 2135.80, 2750)

CA / REV / REP.

Est. Repairs:

days

Res.: Yes or No

Lump Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date:

Person Contacted:

Vehicle: IN / OUT

D.O.A.

24/03/18

D.O.I.

03/05/18

Survey held at

Wearnes

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

Frt O/S

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

Date / Time

Action / Instruction

RECEIVED 22 MAY 2018

Date/Time, File Pass to?

☐

Preli. Report

Days Of Repair:

3

1)

☐

Final Report

Resurvey No. of Trip:

Date/Time, File Return to?

2)

>>15- typist

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Survey Fee:

150

Transportation:

10

S + RS. SI

Photos

Others

Report Format:

merimen

Lump Sum / I.B.I. (\$

2750p

TOTAL

160