

ASS. REC. BY:

REF: CS/AGI18009624/Uvd3nz

Special Instruction:

Surveyor: Marcus

ASSIGNMENT (Office)

From (Person): Julie Mangubat of AGIDate/Time: 28/5/2018 @ 10:08 am

Estimated Cost: _____ Bill to: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SLP 6559PInsured: SLB 2037Dat Workshop m/s: Pegasus EngineeringTel: 6858 1846of 51 Defu Lane 10Policy No: _____ Claim No: C10001624/JM

Sum Insured: _____ Excess: _____

Make of Veh:

(Client's Record)

D.O.A. 25/05/2018CA / REV / REP. / REV 24 HRS (up)

H.O.D. Endorsement: _____

Date/Time: 10:20 am @ 28/5/18Person Contacted: AlvinVehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	<u>SLP 6559P-x</u>
	<u>SLB 2037D-x</u>

Est. Repairs: 8 days Res.: Yes or NoLum Sum: 20 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

D.O.A. _____ mm

25/5/18

Liba: _____ mm

28/5/18

Survey held at _____

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

Rear

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

28/5/18 Cont. ind 2/5 & 5600 with willies. (Red 5818.87, 517)

RECEIVED 31 MAY 2018

pending for condition (marcus on leave)

RECEIVED 06 JUN 2018

Date/Time, File Pass to?

☐ : Prel. ReportDays Of Repair: 81) ☐ : Final ReportResurvey No. of Trip: -

Date/Time, File Return to?

2) 30/5- typistAdd Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

S - RS, SI

Photos

Others

TOTAL

350

Report Format: TPLump Sum / I.B.I: (\$ 5600/-)