

ASS. REC. BY:

REF:

C8/FC18009716/49d3¹²

Special Instruction:

Surveyor
cus

Marius

ASSIGNMENT (Office)

From (Person):

Lurene Jaw

of

PCI

Date/Time:

31/5/18 @ 11-41am

Estimated Cost:

Bill to:

OD (TP) WS / TP RES / OD RES / EVA / INV / MV ? CS

To Inspect Vehicle No:

G8B 5146X

Insured:

8HC 0729X

at Workshop m/s

NPH Auto

Tel:

678 40663

of

Blk 9005 Tampines Street 93 # 01-246/254

Policy No:

Claim No:

D18004225 MPSTH

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

24/5/2018

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

11.51am @ 31/5/18

Person Contacted:

Peggy

Vehicle IN/OUT

Date/Time

Action/Instruction

() Estimate

01/6/18 @ 4-53pm revised to Lurene by email.

Est. repairs:

4 days

Res.: Yes or No

D.O.A.

24/5/18

D.O.I.

31/5/18

Lump Sum:

20 %

3 Val.: Yes or No

Survey held at

CA / REV / REP. / 24 HRS

1391R

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

Date:

Person Contacted:

Vehicle: IN / OUT

Rear

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

Date / Time

Action / Instruction

214 627 11 months plus

06/18 2/5 \$2550 confirmed with Roy (Red \$1400, 362)

RECEIVED 08 JUN 2018

Date/Time, File Pass to?



Prel. Report

Days Of Repair:

4

1. 05/6 2018



Final Report

Resurvey No. of Trip:

1

Date/Time, File Return to?

2)

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Weekend (\$

Survey Fee:

130

Transportation:

50

S + RS, \$

50

Photos

58

Others

TOTAL

288

Report Format:

7P

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

2550