22/03/2003

ASS. REC. BY: | REF: CS/EGI18011726/Dqd3n4 | Special Instruction:

Surveyor : Setthyu

ASSIGNMENT (Office)

From (Person): Yee Pei Li of EGI Date/Time: 27/6/2018 @ 12.25pm

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SHD 6282Y Insured: YL 4512D

at Workshop m/s SMRT Tel: 6866 2672

of 60 woodlands Ind. park E4

Policy No: Claim No: YL4512D/SL/pl

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A. 25/06/2018

CA / REV / REP. / REV 24 HRS 'wp?

H.O.D. Endorsement:

Date/Time: 12.32pm @ 27/6/18 Person Contacted: Shenti Vehicle (IN) / OUT

Date/Time	Action/Instruction
	(✓) Estimate
	SHD 6282Y - NA/INC1702222 1/Z4 DOA: 20/11/2017
	YL4512D - X
28/6/18 @ 4.41pm	revised to Steve Lian by email,
	Final Fig $9558.58, 6 days (Ped $18906.28, 66%)

Est. Repairs: 6 days Res.: Yes or No

Lum Sum: . % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

D.O.A. 25/6/2018 D.O.I. 27/6/2018

Survey held at SMRT

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

O/s Front

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

Date / Time	Action / Instruction
	TAX/06/18/2121
	RECEIVED 10 JUL 2018
	Ergo - YL4512D
	30/7/2018

Date/Time, File Pass to? [ ] : Preli. Report

1) 28/7 [signature] [ ] : Final Report

Days Of Repair: 6

Resurvey No. of Trip: 2

Date/Time, File Return to?

2)

Add Fee: [ ] : Site Insp ($) [ ] : Interview ($) [ ] : Tech. Invs ($) [ ] : Weekend ($)

Survey Fee: Transportation: S + RS SI Photos Others

Report Format : TP

Lump Sum / I.B.I: ($ 9558.58)

TOTAL 350