

ASS. REC. BY:

REF: CS/FCI/8013062/

Asd321

Special Instruction:

Surveyor:

CWS

Adrian

ASSIGNMENT (Office)

From (Person):

Joanne Yong

of

FEL

Date/Time: 17/11/18 @ 5.21pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No.:

SJS 4653X

Insured:

SHD 6667X

at Workshop m/s

Modern Automotive

Tel:

6748 4422

of

Blk 3023A Ubi Rd 1 # 01-58/61

Policy No.:

Claim No.:

D18005473 MP8H

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

14/07/2018

CA / REV / REP. / REV 24 HRS

Cap

H.O.D. Endorsement:

Date/Time:

9.42am @ 18/7/18

Person Contacted:

Grace

Vehicle IN/OUT

Date/Time

Action/Instruction (✓) Estimate

SJS 4653X - X

SHD 6667X - CC3/LCR17008970/H12b3q2 DOA: 415/2017

19/07/18 @ 17:26 p.m revert pending estimate from repairer to Joanne via email.

17/09/18 Confirmed HS \$3,350/- @ 5 days with Adrian.
(\$4,087.80 Red - 55% ?)

GIA / PR Seen:

Consistent? : Yes or No

L/Dat.

90

mm

L/Dat.

00

mm

Est. Repairs:

days

Res.: Yes or No

D.O.A.

D.O.I.

18/07/18.

Lum Sum:

%

3 Val.: Yes or No

Survey held at

Modern.

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

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

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

Date / Time

Action / Instruction

TP 1st Cap.

MV - \$16K
LTA - \$9029/- } NCH - \$6,971.00
MV: 16K.
RV: 9K
Nett: 7K.

RECEIVED 21 SEP 2018

Date/Time, File Pass to?

20/09/18

1)

Typist

Date/Time, File Return to?

2)



Preli. Report



Final Report

Days Of Repair:

5

Resurvey No. of Trip:

1

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Weekend (\$

Survey Fee:

150

Transportation:

50

S + RS, SI

Photos

28

Others

TOTAL

228

Report Format:

Lump Sum / I.B.I. (\$) 3,350/- HS