

REC. BY:

REF: CS/C118016773 / Tit bnz Special Instruction:

Surveyor:

ASSIGNMENT (Office)

Mainmen

From (Person):

Jowyn Tay

of

C12

Date/Time: 13092018 2pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SKV 6470R

Insured:

S6D 50B

at Workshop m/s

Borneo motor

Tel:

of

2 Pandan Crescent

Policy No:

DMPCSN 3049251700

Claim No:

SNM18D04387C02

Sum Insured:

Excess:

Make of Veh:

D.O.A.

05092018

(Client's Record)

CA / REV / REP. / REV 24 HRS wpi

17092018 @ 9am - 2pm

I.O.D. Endorsement:

Date/Time:

13092018 215pm

Person Contacted:

Thomas

Vehicle IN / OUT

Date/Time

Action/Instruction (✓) Estimate

SKV 6470R - C12 / AT11800D608 / A20352

DCA: 08012018

S6D 50B - X

Part by Part \$4,226.46. (Red: 2631; 38%)

Est. Repairs:

days

Res.: Yes or No

D.O.A.

D.O.I.

Lum Sum:

%

3 Val.: Yes or No

Survey held at

CA / REV / REP. / 24 HRS

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

Date:

Person Contacted:

Vehicle: IN / OUT
Thomas

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

Date / Time

Action / Instruction

RECEIVED 12 OCT 2018

Date/Time, File Pass to?



Preli. Report

Days Of Repair: 7

1) 12/10 Typist



Final Report

Resurvey No. of Trip: 1

Date/Time, File Return to?

2)

Add Fee:



Site Insp (\$)



Interview (\$)



Tech. Invs (\$)



Weekend (\$)

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

Report Format: TP

Lump Sum / Est: (\$

4226.46)

TOTAL

220