22/03/2002

ASS. REC. BY: | REF: CS/SMO18017027/Ag bn2 | Special Instruction:

Surveyor: Marimen

ASSIGNMENT (Office)

From (Person): Agnes Chan of SMO Date/Time: 18/9/2018 8:44am

Estimated Cost: - Bill to:

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

To Inspect Vehicle No: GBH 1802E Insured: GBB 4391K

at Workshop m/s People's Vehicle Tel:

of Blk 3023A Ubi Rd 1 #01-60

Policy No: D18M1PCVE000488 Claim No: CMTO1804022

Sum Insured: Excess:

Make of Veh: D.O.A. 14.09.2018
(Client's Record)

CA / REV / REP. / REV 24 HRS 'WP' H.O.D. Endorsement:

Date/Time: 18/9/2018 5.40am Person Contacted: Janet Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	GBH 1802E - NA/CTL1801694G/24 DOA: 14/9/18
	GBB 4391K - x
24/9/18 @	12.20pm informed Agnes Chan, we are pending estimate from negotiator.
12/11/18 @	3.30pm revised to Agnes Chan via Marimen,
	Final Fig $ 3148.20, 4 days. (Red $1732.67, 35%)

Est. Repairs: 4 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. D.O.I. 19/09/18

Survey held at People.

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 Sompo.

RECEIVED 12 NOV 2018

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

1) 12/11 Thursday ☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 4

Resurvey No. of Trip: 1

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

Report Format : MER-TP

Lump Sum / I.B.I: ($ 3148.20)

Survey Fee:	
Transportation:	250
___$ + RS___SI	10
Photos	
Others	
TOTAL	260