22/03/2002

ASS. REC. BY: | REF: CS/MSG1801768I/Urd 3 n2 | Special Instruction:

Surveyor : Marcus Meirmen

ASSIGNMENT (Office)

From (Person): Christina Wong of MSIG Date/Time: 28/9/18 @ 3.18 pm

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SFC 1938 ~~M~~ B Insured: GBA 4967E

at Workshop m/s Koon Heng Motor Tel: 6748 7348

of Ikaki Bkt Ave 6 #02-14

Policy No: A2793624 7MV Claim No: 570663

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A. 12/09/2018

CA / REV / REP. / REV 24 HRS 1up

H.O.D. Endorsement:

Date/Time: 3.32pm @ 28/9/18 Person Contacted: Winnie Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SFC 1938 M-X
	GBA 4967E-NA | INC1801665 4/ t3 DOA : 12/9/18
02/10/18	@10:31 a.m. revised IA to Christina Wong via meirmen.

GIA / PR Seen ✓ Consistent : Yes or No

Est. Repairs: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS 1up

Vehicle: IN / OUT

Date: Person Contacted:

D.O.A. 12/9/18 D.O.I. 28/9/18

Survey held at

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

O/S Wing mirror

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

Date / Time	Action / Instruction
	SJA 4308D
12/11/18	2/S #800 confirmed with Mr Tan. CRed 689, 469D

RECEIVED 13 NOV 2018

Date/Time, File Pass to? ☐ : Preli. Report Days Of Repair: 1

1) ☐ : Final Report Resurvey No. of Trip: —

Date/Time, File Return to? Survey Fee:

2) 13/11 - typist Transportation: 150

Add Fee: ☐ : Site Insp ($) S + RS SI 10

☐ : Interview ($) Photos

Report Format : meirmen ☐ : Tech. Invs ($) Others

Lump Sum / I.B.I: ($ 800/=) ☐ : Weekend ($)

TOTAL 160