

ASS. REC. BY:

REF:

CS/uo18019219/71td352

Special Instruction:

Surveyor:

Taufik

ASSIGNMENT (Office)

From (Person):

Jony Lew

of

u01

Date/Time: 23/10/18 @ 11:31am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

EQ 911 Y

Insured:

at Workshop m/s

cycle & Carriage Ind.

Tel:

9186 5112

of

188 penden loop

Policy No:

D HOM 110154251601

Claim No:

Sum Insured:

Excess:

\$ 1000.00

Make of Veh:

(Client's Record)

D.O.A. 21/10/2018

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

11:32am @ 23/10/18

Person Contacted:

Alan

Vehicle: IN/OUT

Date/Time

Action/Instruction (✓) Estimate

24/10-

EQ 911Y - CS / LAWID0001346 / Kfgl

D.O.A. 5/5/2009

Revert via email, uneconomical total loss

Submit uneconomical total loss report

MV: 68000 / LTA: 53,342 / - NV: 14658 /

Est. Repairs:

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Alan

D.O.A.

D.O.I. 23/10/18

Survey held at

C&C Penden Loop

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

Repair: 53,342

2011 Dec new car \$217K

total loss, Not Economical to Repair.

RECEIVED 29 OCT 2018

Date/Time, File Pass to?

☐

Preli. Report

1) 29/10 Typist

☐

Final Report

Date/Time, File Return to?

2)

Days Of Repair: —

Resurvey No. of Trip: —

Add Fee:

☐

Site Insp (\$

☐

Interview (\$

☐

Tech. Invs (\$

☐

Weekend (\$

Report Format:

OD-TL

Lump Sum / I.B.I. (\$

Survey Fee:

2000

Transportation:

60

S + RS + SI

Photos

162

Others

580

TOT

31/10/18

2222

70x25=1750
1750+250=2000