22/03/2002

ASS. REC. BY: | REF: CS/EGL19000434/Usbn2 | Special Instruction:

Surveyor: Marcus.

ASSIGNMENT (Office)

From (Person): Steve Lim of EGL Date/Time: 09012019 11:14am

Estimated Cost: Bill to:

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

To Inspect Vehicle No: GBE 9577T Insured: GBF 8957G

at Workshop m/s MG Solution Tel:

of 23 Kaki Bukit Ave 4 #03-03B

Policy No: Claim No: GBF 8957G

Sum Insured: Excess:

Make of Veh: D.O.A. 04012019
(Client's Record)

CA / REV / REP. / REV 24 HRS ~~WP~~

H.O.D. Endorsement:

Date/Time: 09012019 11:23am Person Contacted: Shuna Vehicle ~~IN~~ / OUT

Date/Time	Action/Instruction (✓) Estimate
	GBE 9577T - NA / CTL19000369/73 DOA: 04012019
	GBF 8957G - X
10/01/19	@ 11:45 a.m. revised PA to Steve via email.

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 4 days Res.: Yes or No

Lum Sum: 70 % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. 4/1/19 D.O.I. 8/1/19

Survey held at 9/1/2019

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

Rear

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

Date / Time	Action / Instruction
	LIA GBF8957G
9/1/19	Confirmed L/S $8000 with Sheron.
10/01/19	Confirmed L/S $8,000/- @ 4 days with Marcus ($8,148.52 Red - 51%)

RECEIVED 14 JAN 2019

Date/Time, File Pass to? 14/01/19 ☐ : Preli. Report

1) Typist ☑ : 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 :

Lump Sum / I.B.I: ($ 8,000/- L/S)

Survey Fee:	
Transportation:	
___S + RS, ___SI	
Photos	350
Others	
TOTAL	