22/03/2002

ASS. REC. BY: Surveyor : Marcus

Mariman

REF: CS/III 19008176 / 44d3 n2

Special Instruction:

ASSIGNMENT (Office)

From (Person): Gabriel Wee of III Date/Time: 9.5.19 11.57a.m

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SKB 2886G Insured: SHC 3882R

at Workshop m/s Imperium Automotive Tel: 97489940

of 25 Kaki Bukit Road 4 #01-49 Synergy @ KB

Policy No: Claim No:

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A. 7.5.2019

CA / REV / REP. / REV 24 HRS "up" H.O.D. Endorsement:

Date/Time: Person Contacted: Shawn Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SKB 2886G – NA/TMI 19008127/24 D.OA – 07/05/2019
	SHC 3882R – NA/TMI 19008127/24 DOA – 07/09 2019

GIA / PR Seen: X Consistent? : Yes or No

Est. Repairs: 5 days Res.: Yes or No

Lum Sum: 20 % 3 Val.: Yes or No

L1A 24464

CA / REV / REP. / 24 HRS Vehicle: IN / OUT

Date: Person Contacted:

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

D.O.A. 7/5/19 D.O.I. 9/5/19

Survey held at

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 2 y5- Dep/1k.

nett 8536

13/5/19 L/S $6400 confirmed with Shawn. (Red $ 8672-04, 58%)

RECEIVED 1 5 MAY 2019

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

1) 15/5. Marcus ☐ : Final Report

Date/Time, File Return to?

2)

Days Of Repair: 5

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp ($) __S + RS,__SI

☐ : Interview ($) Photos

☐ : Tech. Invs ($) Others

☐ : Weekend ($)

Report Format : MER-7P

Lump Sum / I.B.I: ($ 6400)

Survey Fee:	450
Transportation:	10
Photos	
Others	
TOTAL	460