

ASS. REC. BY:

REF:

CS/FCI19010193/ASda n2

Special Instruction:

Surveyor: Rasu

ASSIGNMENT (Office)

From (Person): Henry Kao

of FCI

Date/Time: 7/6/2019 5:49pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SFZ 905G

Insured: CHA 8656E

at Workshop m/s Stuttgart Auto

Tel: 63310680

of JFA Tanjung Penjun

Policy No:

Claim No: D19003672 MESH

Sum Insured:

Excess:

Make of Veh:

D.O.A. 3/6/2019

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 10/6

Person Contacted: EVA

Vehicle IN / OUT

Date/Time

Action/Instruction Schmidt ()

SFZ 905G - X

SHA 8656E - X

17/06/19 @ 12:15 pm revised PA to Henry via email.

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

Vehicle: IN / OUT

Date:

Person Contacted:

L/Bal. 6 mm

L/Bal. 6 mm

D.O.A. 03/06/19

D.O.I. 14/06/19

Survey held at

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

d/s FR

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

Date / Time

Action / Instruction

20/08/19 Confirmed P/P \$ 8,399.89 @ 5 days with Rasu / (C\$ 7,028.82 Red - 46%)

RECEIVED 2 AUG 2019

Signature and date 20/8/2019

Date/Time, File Pass to?

20/08/19

Preli. Report

Final Report

Date/Time, File Return to?

2)

Days Of Repair: 5

Resurvey No. of Trip: 1

Add Fee:

Site Insp (\$)

Interview (\$)

Tech. Invs (\$)

Weekend (\$)

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

5x15 = 75

170 + 75
50
50
30
375

Report Format :

Lump Sum (I.B.P.) (\$ 8,399.89 AP)