ASS. REC. BY: | REF: CS/FC1190118889 | Eq d3n2 | Special Instruction:

Surveyor: Steve

ASSIGNMENT (Office)

From (Person): Henry Kao of FCI Date/Time: 4/7/2019

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SGZ1116Z Insured: SHC949C

at Workshop m/s Car Pro Auto Tel: 93382859

of BLK 6 Woodlands Rd 399J

Policy No: Claim No: D19004330MFSH

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A. 2/7/2019

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

Date/Time: 5/7 Person Contacted: Sini Vehicle IN/OUT

Date/Time	Action/Instruction
	SGZ1116Z-X
	SHC949C-X
25/9/19 @	4.24pm revised to Henry Kao by email.

Est. Repairs: 4 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. mm L/Bal. mm

D.O.A. 2/7/19 D.O.I. 5/7/19

Survey held at Car Pro

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
Note:	MV - 65,000 24/9/19 Finalize confirm $3300, 4 days (Si Ni)
LTA	PV - 49,881 (Rcd @ 4286.52, 57%)
	NV - 24,119

RECEIVED 25 SEP 2019

25/9/2019

Date/Time, File Pass to? 1) 26/9 tupisa

Date/Time, File Return to?

2)

☐ : Prell. Report

☐ : Final Report

Days Of Repair: 4

Resurvey No. of Trip: 1

Add Fee: ☐ : Site Insp ($) ☐ : Interview ($) ☐ : Tech Invs ($) ☐ : Weekend ($)

Report Format : TP

Lump Sum / I.B.I: ($ 3300)

Survey Fee:	150
Transportation:	50
S + RS. SI	50
Photos	111
Others	
TOTAL	361