

ASS. REC. BY:

REF:

CS/F 119012597/T1+83M

Special Instruction:

Surveyor: Tankin

## ASSIGNMENT (Office)

From (Person): Sitharaof FCIDate/Time: 16.7.19 4.49pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SLA 3127BInsured: SHA 8201Jat Workshop m/s Borneo MotorTel: 98476171 166311860 Thomasof 1 inch cape Body care Centre level 4

96996192

Policy No:

Claim No: D19004584MFS4

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 11.7.2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 16.7.19 5.02pmPerson Contacted: AshlynVehicle: IN / OUT

| Date/Time    | Action/Instruction (✓) Estimate  |
|--------------|----------------------------------|
|              | SLA 3127B X                      |
|              | SHA 8201J CS/FCI13018792/1vm3K3  |
| 24/7@ 5-30pm | Revised preli. advice via email. |

Est. Repairs: \_\_\_\_\_ days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUTThomas

D.O.A.

D.O.I.

Survey held at Borneo Motor

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

Rear O/S

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

| Date / Time | Action / Instruction                                  |
|-------------|-------------------------------------------------------|
| 2/8/19      | Email Thomas \$12,855.10, 10 days (Red: 6801.40, 34%) |

RECEIVED 06 AUG 2019

Date/Time, File Pass to?

☐

: Preli. Report

1) 5/8 Typist

☒

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: 10Resurvey No. of Trip: 1

9x15 = 135

Report Format: TPLump Sum / I.B.I. (\$) 12855.10

Add Fee:

☐

: Site Insp (\$)

☐

: Interview (\$)

☐

: Tech. Invs (\$)

☐

: Weekend (\$)

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

TOTAL

|           |
|-----------|
| 170 + 135 |
| 50        |
| 50        |
| 42        |
| 447       |