22/03/2002

ASS. REC. BY: | REF: CS/FC1/9017757/Gyf3 | N2 Special Instruction:

(CWS) Surveyor: GQ

ASSIGNMENT (Office)

From (Person): Karen Tan of FCI Date/Time: 8.10.19 3.32p.m

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SJV 9147S Insured: SHC 3976D

at Workshop m/s Tan Lim Motor Tel: 64585151

of 1 Defu Lane 6

Policy No: Claim No: D1900642JMFSH

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A. 1.10.2019

CA / REV / REP. / REV 24 HRS

Date/Time: 8.10.19 3.40p.m Person Contacted: Caymon H.O.D. Endorsement: Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate.
	SHC 3976D : CS/FC1801589A/KQ/3n2 DOA: 25/08/2018
	SJV 9147S : NA/INC19014167/24 DOA: 14/08/2019

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

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

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

Date: Person Contacted:

D.O.A. D.O.I. 07-10-19

Survey held at W/S 2pm

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

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

Date / Time	Action / Instruction
	COE : 37351
11/10/19	sent Preli by email
5/11/19	Confirm L/S $2650/= (Red $2836-08, 5%) 5/11/2019
	MV = $45,000/=
	GTA = $37,351/=
	Nett = $7649/=

RECEIVED 06 NOV 2019

Date/Time, File Pass to? 1) ☐ : Preli. Report ☐ : Final Report

Date/Time, File Return to? 2) 05/11/19 Typist

Report Format :

Lump Sum / E.P. / C :

L/S $2650/=

Days Of Repair: 5

Resurvey No. of Trip: 1

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

Survey Fee:	140
Transportation:	50
S + RS. SI	
Photos	40
Others	
TOTAL	230