22/03/2002

ASS. REC. BY: | REF: CS/INC 190 22212/KSf 3112 | Special Instruction:

Surveyor: Kenneth

ASSIGNMENT (Office)

From (Person): Cynthia Ang of INC Date/Time: 17 December 2019

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SJT 9693S Insured: SLG 2353P

at Workshop m/s NGS Motorsport Pte Ltd Tel: 9695 5547

of 10 Ang Mo Kio Ind Park 2A #02-01

Policy No: Claim No: MT/1074313-002

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A. 02/12/2019

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

Date/Time: 17/12/2019 @ 04:52pm Person Contacted: Evelyn Ng Vehicle IN / OUT

Date/Time	Action/Instruction (V) Estimate
	SLG 2353P : X
	SJT 9693S : NA/AIG18623303/24 DOA : 28/12/2018

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

CA / REV / REP. / 24 HRS

Date: 10'24 Person Contacted: Vehicle: IN / OUT

D.O.I. 17/12/19

Survey held at 1:57pm

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

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

Date / Time	Action / Instruction
/	File pass to
23/12	(Rep & 220d email & Ca from
	($2,060.76 Red - 48%)

RECEIVED 24 DEC 2019

Date/Time, File Pass to? 24/12/19

1) Typist

Date/Time, File Return to?

2)

[ ] : Prell. Report

[✓] : Final Report

Days Of Repair: 5

Resurvey No. of Trip: /

Add Fee: [ ] : Site Insp ($)

[ ] : Interview ($)

[ ] Tech Invs ($)

[ ] Weekend ($)

Survey Fee:

Transportation: __ S + RS __ SI

Photos

Others

TOTAL 250

Report Format:

Lump Sum / I.B.I: ($ 2,200/- 4S)