22/03/2002

ASS. REC. BY: Surveyor: Marcus | REF: OS/AGI20002610/Uyd3n2 | Special Instruction:

ASSIGNMENT (Office)

From (Person): my Rafilla of AGI Date/Time: 14/2/2020 @ 3.01pm

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SLZ 9907X Insured: SML 5908G

at Workshop m/s precise Auto Tel: 6745 7367

of 1 Kaki Bukit Ave 6 # 02-33/34

Policy No: Claim No: C10005580

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A. 13/02/2020

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

Date/Time: 3.27pm @ 14/2/2020 Person Contacted: Arine ...... Vehicle IN / OUT

Date/Time	Action/Instruction
	Johnny ( )
	SLZ 9907X - X
	SML 5908G - X

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: 10 days Res.: Yes or No

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

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted: CA

L/Bal. 6 mm L/Bal. 6 mm

D.O.A. 13/2/20 D.O.I. 14/2/20

Survey held at

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
	~~TOTAL LOSS?~~ Rear axle cracked
	COE ~~30-5-2020 3mth plus~~
	COE 28-2-2025 MA16579 N044 13481
24/3/20	Confirm L/S $8200 with yan hong (Red $9218.96. 53%)

RECEIVED 24 MAR 2020

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

1) ☐ : Final Report

Days Of Repair: 10

Resurvey No. of Trip: 3

Date/Time, File Return to?

2) 24/3/20 Typist

Add Fee: ☐ : Site Insp ($) __S + RS, __SI

☐ : Interview ($) Photos

☐ : Tech. Invs ($) Others

☐ : Weekend ($)

Survey Fee:

Transportation:

Report Format :

Lump Sum / I.B.I: ($ $8200F)

TOTAL 450