

Special Instruction:

4 Sum: \$ ~~4859.94~~ \$4542.00

Third Parties:

Claimant:

Surveyor:

Workshop: **Tower Transit**

Claim No: NSV 1900 113

Excess:

D.O.A. 25.2.2019

H.O.D. Endorsement/Date: _____

Date/Time: _____ Confirmed with _____ Final Fig. _____, _____ days (Red \$ _____ / _____ %; Original ~~4~~⁵ days)
Date/Time: 13/08/20 Submit Final Fig. \$1290, 02 days (Red \$ 3252 / 72 %; Original 5 days)

Date/Time: 13/08/20 Submit Final Fig \$1290, 02 days (Red \$3252 / 72 %; Original 5 days)

Para(1) : Parts found not replaced (To highlight *R* or *UB*, *LR*, *Etc*)

	Amount of Damages (Parts Not Consistent : MC)

Market Value		Fee Charged:	Date:
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Fee Charged:

Basic & Add	
Transport	
Photos	
Others	
Total	

2) DateTime

File Return to

4) Date/Time

File Return to

6) Date/Time

File Return to