

REF: CSI/LPC 20006504/ GS f3

Special Instruction:

Part B) Part: \$ 102013.85

Third Parties:

Claimant:

Surveyor: New Auto Ser Appraisal

Workshop: Multilateral Services

From (Person): Ko Siu Ling of LPC Date/Time: 22-6-20 10:53am
Estimated Cost: _____ Bill to: _____

OD/FP Re-inspection / Evaluation

To Inspect Vehicle No: SJJ 63159 Insured: _____
at Workshop n/a. Multilateral Services Tel: 64535654
of 160 sin ming drive sin ming auto city #06-01

Policy No: _____ Claim No: 1919191 W96/28498

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 24.11.2019
(Client's Record)

H.O.D. Enregistrement/Date:

Date/Time: _____ Person Contacted: _____ Vehicle IN / OUT _____

Date/Time: _____ Confirmed with _____ Final Fig _____, ____ days (Red \$____ / ____%; Original 8 days)

Date/Time: 25/06/2020 Submit Final Fig \$ 3,854.27, 5 days (Red \$ 6,159.58 / 62 %; Original 8 days)

Date/Time	Action/Instruction
	paper survey, Assign from Malaysia UIC SJJ 63156- X

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

Para(2) : Comments on consistency of damages (Parts Not Consistent : NC)

Para(3) : Nett Value

Market Value : _____

Salvage Value : _____

Nett Value : _____

Inspected/
Evaluated by:

Fee Charged:

Date: _____

Basic & Add

Transport

Photos

Others

Total

1) Date/Time _____ File Pass to _____

2) Date/Time _____ File Return to _____

3) Date/Time _____ File Pass to _____

4) Date/Time File Return to

5) Date/Time _____ File Pass to _____

6) Date/Time _____ File Return to _____