

REF: CS1 / LPC 20007165 / yf3

Special Instruction:

\$ 20,113.00

From (Person): Gerald Poh of UPC ASSIGNMENT (Office)
Estimated Cost: _____ Date/Time: 9-7-2020
Bill to: _____

Third Parties:

Claimant: SkyCom Automobile Service Services

Surveyor:

Workshop: Man in major Services

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: SLF 5544R

Insured: JLA 7737

at Workshop m/s Mun Jin motor

Tel: 62821313

of 2 Kaki Bukit Ave 2 #02-28 Kaki Bukit Anshub

Policy No:

Claim No:

Sum Insured:

Excess:

Make of Veh:

D.O.A. 05-11-2019

(Client's Record)

H.O.D. Endorsement/Date:

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

Date/Time: _____ Confirmed with _____ Final Fig _____, ____ days (Red \$ ____ / ____ %; Original ²² days)

Date/Time: _____ Submit Final Fig _____, _____ days (Red \$ _____ / _____ %; Original _____ days)

[illegible]

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

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