

REF: CS/LAW20010462/ f3

Special Instruction:

ASSIGNMENT (Office)

LS \$24,000.00

From (Person): Siti Marina of Low Yeap Toh Date/Time: 29/09/2020

Estimated Cost: _____ Bill to: _____

Third Parties:

Claimant: Owner

Surveyor: PAR Automotive

Workshop: N-51 Automotive

ODTP Re-inspection / Evaluation

To Inspect Vehicle No: SLK 8494E

Insured: PA 9660R

at Workshop m/s N-51 Automotive

Tel: 6744 0510

of 2 Kaki Bukit Ave 2 #01-17

Policy No:

Claim No: GEP.2304.04.20.ct

Sum Insured:

Excess:

Make of Veh:

D.O.A. 13/03/2018

(Client's Record)

H.O.D. Endorsement/Date: **SJE**

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

Date/Time: _____ Confirmed with _____ Final Fig _____, ___ days (Red S _____/____%; Original 10 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)	
--	--

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 _____