

REF: CS1 ~~1-LR~~ 20010573/RIVB

Special Instruction:

Part By Part: \$20524.75

Third Parties:

Claimant:

Surveyor:

Workshop:

From (Person): Al Lee Tyng of ~~LPC~~ LPM Date/Time: 1.10.2020
Estimated Cost: _____ Bill to: _____

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: SDJ 2018L Insured: BPE 4084

at Workshop m/s Cycle or Carriage

of 188 Pandan loops

Policy No: _____ Claim No: **17/18/20/VC11/315893**

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 30-05-2018
(Client's Record)

H.O.D. Endorsement/Date: _____

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

Date/Time: 11/11/20 Confirmed with _____ Final Fig _____, _____ days (Red \$ _____ / _____ %; Original _____ days)

Date/Time: 11/11/20 Submit Final Fig \$20,731.78, 12 days (Red \$192.97/ 1 %; 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:

Basic & Add

Transport

Photos

Others

Total

Date: _____

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 _____