

REF: CS/Asm 20012779 /TIVf3

Special Instruction:

2/Sum: \$ 53,500-00

From (Person): Chan Kan Chun of AXA Date/Time: 20-11-2020

Estimated Cost: _____ Bill to: _____

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: SCS 1919m

Insured: SJE 8298K

at Workshop m/s Minute Autoworks

Tel: 9270 5882

of BIK 13 Kaki Bukit Road 8 #01-05, Balmay Biz Centre

Policy No:

Claim No: 50m02PVA

Sum Insured:

Excess:

Make of Veh:

D.O.A. 24-6-2020

(Client's Record)

Re-Inspection : 1. Dec. 2020 100.m

H.O.D. Endorsement/Date:

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

Date/Time: _____ Confirmed with _____ Final Fig _____, _____ days (Red \$ _____/_____%; Original 58 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