

Job Sheet (/ClaimWS/Surveyor/JobSheet/354363)



PRI Documents



Close



PRI Header Details

Claim No	D20004943MFSH	Policy No	D-20094921MFSH	Claimant S.No & Name	1 & COMPLETE V
Workshop Name	COMPLETE VMS PTE LTD (Contact Person : LILY/LI HUI (TEL; 64539622))	Survey Location & Contact Details	176 SIN MING DRIVE #03-14SIN MING AUTOCARE COMPLE Mobile: 0 , Phone: 64550012 , Fax: 65540012 EmailId: LIHUI@COMPLETEVMS.COM.SG		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE:		
Insured Name	CITYCAB PTE LTD	Insured Vehicle No	SHB4882P	TP Vehicle No	SLA6407Z
PRI Recieved Date	07-12-2020 05:25:45 PM	Surveyor Appointed Date	08-12-2020 09:08:23 AM	Surveyor Accept Date	08-12-2020 11:0

Survey Report Upload

Surveyor Inspection Date *:	<input type="text"/>	Surveyor Report Date	08-12-2020	Upload Survey Report *:	<input type="button" value="Choose File"/> No
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Vehicle Particulars

Make	<input type="text" value="Please Select Make"/>	Model	<input type="text" value="Please Select Model"/>	Year	<input type="text" value="Select Year"/>
Chasis No	<input type="text"/>	Engine No	<input type="text"/>	Mileage	<input type="text"/>
Color	<input type="text"/>	Cubic Capacity	<input type="text"/>		

Multiple Documents Upload

File Name

Action

Surveyor Job Remarks

Remarks	<input type="text"/>	<input type="button" value="Save"/>
Date	Job Remarks	Action

FINAL SUMMARY

Surveyor Final Adjusted Amount	<input type="text"/>	Surveyor Fees	<input type="text"/>	Remarks
				<input type="text"/>

<input type="button" value="Submit Assessment"/>
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