

REF: CS1/LAW21003914/Dtf3

Special Instruction:

ASSIGNMENT (Office)

L/SUM : \$11800.00

From (Person): TEO YI XUAN of LAW Date/Time: 25/3/2021 12:39 PM

Estimated Cost: _____ Bill to: _____

Third Parties:

Claimant:

Surveyor:

Workshop: 889 CAR SERVICING PTE LTD

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: SJK 3312D Insured: SKA 3175Z

at Workshop m/s 889 CAR SERVICING PTE LTD Tel: 9636 6965

of 10 KAKI BUKIT ROAD 2 #03-34 FIRST EAST CENTRE SINGAPORE 417868

Policy No: _____ Claim No: MC/MC 9396/2020

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 19-10-2015
(Client's Record)

H.O.D. Endorsement/Date:

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

Date/Time: 21/9/2021 Confirmed with Final Fig , days (Red \$ / %; Original 8 days)

Date/Time: 21/9/2021 Submit Final Fig 6700, 6 days (Red \$ 5100 / 43 %; 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 _____