

REF: CS1/LAW21008876/T1tc

Special Instruction:

ASSIGNMENT (Office)

From (Person): Shi Min of Willy Tay's Date/Time: 04.07.2021

Estimated Cost: _____ Bill to: _____

LS \$5,300.00

Third Parties:

Claimant: Owner

Surveyor: Sincere Appraisal

Workshop: 28 Autowerkz

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: SJL 7274Z

Insured: FBJ 5105Y

at Workshop m/s 28 Autowerkz

Tel: 9362 8159

of 1002 Bukit Merah Lane 3 #01-83

Policy No:

Claim No: MSIG.19.0192.WT.lsm

Sum Insured:

Excess:

Make of Veh:

D.O.A. 08/12/2018

(Client's Record)

H.O.D. Endorsement/Date:

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

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

Date/Time: 25/08/21 Submit Final Fig LS\$4,000.00 4 days (Red \$ 1,300 / 24 %; Original 6 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)	
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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 _____