Surveyor :

REF: CS1/SMR21009229/Uuf3

Special Instruction:

L/SUM : $ 6,900.00

ASSIGNMENT (Office)

From (Person): GAN KWAI LING of SMR Date/Time: 2/9/2021 11:48 AM

Estimated Cost: _____ Bill to: _____

Third Parties:

Claimant: _____

Surveyor: _____

Workshop: NINETEEN AUTOWERKS PTE. LTD.

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: SME 281A Insured: SHD 6234L

at Workshop m/s NINETEEN AUTOWERKS PTE. LTD. Tel: 94507920

of 15 KAKI BUKIT ROAD 4 #01-53 BARTLEY BIZ CENTRE SINGAPORE 417807

Policy No: _____ Claim No: _____

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 20/03/2021

(Client's Record)

H.O.D. Endorsement/Date: _____

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

Date/Time: _____ Confirmed with _____ Final Fig _____, ___days (Red $____/___%; Original 5 days)

Date/Time: _____ Submit Final Fig _____, ___days (Red $_____/___%; Original___days)

Date/Time	Action/Instruction
	SME 281A- X
	SHD 6234L - CC3/AIG20013828/Ggs3q2 DOA :11/12/2020

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 _____