

REF: CS1/LPM21010360/Auf3

Special Instruction:

L/SUM : \$ 15,790.00

Third Parties:

Claimant:

Surveyor:

Workshop: New Hock Teck Motor Pte Ltd

ASSIGNMENT (Office)

From (Person): KO SIEW LING of LPC Date/Time: 7/10/2021 7:05 PM

Estimated Cost: _____ Bill to: _____

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: SFG 7715S

Insured: KCP 5588

at Workshop m/s NEW HOCK TECK MOTOR PTE LTD

Tel: 6747 9241

of 1 KAKI BUKIT AVENUE 6 #01-43 AUTOBAY @ KAKI BUKIT

Policy No:

Claim No: 18/18/21/VC00/337104

Sum Insured:

Excess:

Make of Veh:

D.O.A. 13/09/2018

(Client's Record)

H.O.D. Endorsement/Date:

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

Date/Time: _____ Confirmed with _____ Final Fig _____, ____ days (Red \$____/____%; Original 10 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:

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 _____