Surveyor :

LPM
REF: CS1/~~LP~~C21012970/Kvf3

Special Instruction:
L/SUM : $ 13,000.00

ASSIGNMENT (Office)

From (Person): AU LEE TYNG of ~~LPC~~ LPM Date/Time: 22/12/2021 10:43 AM

Estimated Cost: _____ Bill to: _____

Third Parties:
Claimant: _____
Surveyor: _____
Workshop: YEE AUTO SERVICE

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: SMP 6038P Insured: WMP 4064

at Workshop m/s YEE AUTO SERVICE Tel: 6457 5768

of ~~BLK 15, #01-107 SIN MING INDUSTRIAL ESTATE~~ . SINGAPORE 575673

Policy No: _____ Claim No: 19/19/20/VP02/308070

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 10/11/2019
(Client's Record)

H.O.D. Endorsement/Date: _____

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

Date/Time: _____ Confirmed with _____ Final Fig _____, ___days (Red $____/___%; Original 7 days)

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

Date/Time	Action/Instruction
	SMP 6038P- X
	WMP 4064- X

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 _____