

REF: CS1/LAW22000228/Tqf3

Special Instruction:

L/SUM : \$ 5250.00

Third Parties:

Claimant:

~~PROMINENT APPRAISER SVS~~

Workshop: YI HENG MOTOR

ASSIGNMENT (Office)

From (Person): SERENE NG of LAW Date/Time: 7/1/2022 1:46 PM
Estimated Cost: _____ Bill to: _____

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: GBE 2575U Insured: SKK 8679B
at Workshop m/s YI HENG MOTOR WORKSHOP Tel: 6509 0052/97412120 patrick
of BLK 1 KAKI BUKIT AVE 6 #02-19

Policy No: RT/YJ/348/2021/ml Claim No: RK.atv.INS.Y44.114896.21/SN

Sum Insured: _____ Excess: _____

Make of Veh: _____
(Client's Record) _____ D.O.A. 24-01-2021

SJE

H.O.D. Endorsement/Date: _____

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

Date/Time: _____ Confirmed with _____ Final Fig _____, ____ days (Red \$ ____/____%; Original 6 ____ days)

Date/Time: 04/03/22 Submit ~~Final Fig~~ LS \$4000, 5 days (Red \$ 1250 / 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:

Basic & Add

Transport

Photos

Others

Total

Date: _____

1) Date/Time 04/03/22 File Pass to Typist

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 _____