

REF: CS1/LAW22000767/Uvf3

Special Instruction:

ASSIGNMENT (Office)

From (Person): HUE JIA PEI of LAW Date/Time: 21/1/2022 11:52 AM

Estimated Cost: _____ Bill to: _____

L/SUM : \$ 3710.00

Third Parties:

Claimant:

Surveyor:

Workshop: SOON LEE CHOON

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: SLM 8130U

Insured: SLT 6410M

at Workshop m/s SOON LEE CHOON

Tel:

of 5032 ANG MO KIO INDUSTRIAL PARK 2, #01-283

Policy No: GS/20/4256/SLC

Claim No: RT/JY/325/2021/ml

Sum Insured:

Excess:

Make of Veh:

D.O.A. 13-08-2020

(Client's Record)

H.O.D. Endorsement/Date:

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

Date/Time: _____ Confirmed with _____ Final Fig _____, ____ days (Red \$____/____%; Original 03 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 _____