

REF: CS3/ASM21012131/Gty3-1

Special Instruction:

LS : \$15,800 / 7DAYS

ASSIGNMENT (Office)

From (Person): CYNTHIA LOH of AXA Date/Time: 02/03/2022
Estimated Cost: _____ Bill to: _____

Third Parties:

Claimant:

Surveyor: J & M CONSULTANCY

Workshop: A-TEC AUTOMOTIVE PTE LTD

OD TP Re-inspection / Evaluation

To Inspect Vehicle No: SMY 4141P Insured: SHB 4271C

at Workshop m/s **A-TEC AUTOMOTIVE PTE LTD**

of 8 KAKI BUKIT AVE 4 #05-27 PREMIER SINGAPORE 415875

Policy No: _____ Claim No: S1M03N5A

Sum Insured: _____ Excess: _____

Make of Veh: _____
(Client's Record) _____ D.O.A. 27/11/2021

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)

[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 _____