

REF: CS3/MSG21007715/Gqy3-1

Special Instruction:

ASSIGNMENT (Office)

From (Person): RICHARD ANG of MSIG Date/Time: 20/09/2022

Estimated Cost: _____ Bill to: _____

Third Parties:

Claimant:

Surveyor:

Workshop: EVERBRIGHT MOTOR
CYCLES CO

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: FBS 6585R Insured: SMS 5987R

at Workshop m/s EVERBRIGHT MOTOR CYCLES CO

of 53 PAYA UBI INDUSTRIAL PARK #01-10/12 UBI AVENUE 1 SINGAPORE 408934

Policy No: 30001484645

Claim No: 259884

Sum Insured:

Excess:

Make of Veh:

D.O.A. 09/07/2021

(Client's Record)

H.O.D. Endorsement/Date:

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

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

Date/Time: 28/11/22 Submit Final Fig \$1084.10, 2 days (Red \$745.50/ 41 %; 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:

Date: _____

Basic & Add

Transport

Photos

Others

Total

1) Date/Time 28/11/22 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 _____