

REF: CS1/LPM22012946/Dqy3

Special Instruction:

ASSIGNMENT (Office)

From (Person): KO SIEW LING of LPM Date/Time: 23/12/2022

Estimated Cost: _____ Bill to: _____

\$17371.60

Third Parties:

Claimant:

Surveyor: T & C AUTOMOBILE

Workshop: MING HUA AUTO SERVICES

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: SMK 1255M Insured: WB 8918Q

at Workshop m/s MING HUA AUTO SERVICES Tel:

of 160 SIN MING DRIVE #02-16 SIN MING AUTO CITY SINGAPORE 575722

Policy No: _____ Claim No: 18/19/19/VP02/282155

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 13/04/2019
(Client's Record)

(Client's Record)

H.O.D. Endorsement/Date:

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

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

Date/Time: 23/02/23 Submit Final Fig. LS \$6250, 7 days (Red \$1121.60/64 %; Original 9 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

MALAYSIA

Market Value : _____

Salvage Value : _____

Nett Value : _____

Inspected/
Evaluated by:

Fee Charged:

Date: _____

Basic & Add

Transport

Photos

Others

Total

1) Date/Time 23/02/23 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 _____