

REF: CS/LIP23001413/Uqy3

Special Instruction:

LS : \$ 12050 / 7 DAYS

Third Parties:

Claimant:

Surveyor: WG APPRAISAL SERVICES

Workshop: KT GARAGE PTE LTD

ASSIGNMENT (Office)

From (Person): ESTHER CHEAH of LIP Date/Time: 09/02/2023
Estimated Cost: _____ Bill to: _____

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: SML 7016S Insured: SCL 8688Y

at Workshop m/s KT GARAGE PTE LTD

of 1 Kaki Bukit Ave 6 #01-04 Auto Bay @ Kaki Bukit

Policy No: _____ Claim No: IVS22/1516

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 08/09/2022
(Client's Record)

H.O.D. Endorsement/Date: _____

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

Date/Time: 17/02/22 Confirmed with _____ Final Fig _____, ____ days (Red \$ ____/____%; Original ____ days)

Date/Time: 17/02/23 Submit ~~Final Fig~~ LS \$7500, 5 days (Red \$ 4550 / 38 %; Original 7 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 17/02/23 File Pass to Typist

3) Date/Time _____ File Pass to _____

5) Date/Time _____ File Pass to _____

2) Date/Time

4) Date/Time

6) Date/Time

File Return to

File Return to

File Return to