Surveyor:

REF: CS1/LAW23001498/Dny3

Special Instruction:

LS : $ 4300 / 5 DAYS

ASSIGNMENT (Office)

From (Person): MUHAMMAD HAZDI of KELVIN CHIA Date/Time: 30/01/2023

Estimated Cost: _____ Bill to: _____

Third Parties:

Claimant: _____

Surveyor: KTO AUTOMOBILE

Workshop: OCCI_SONO MOTOR.COM

OD/TP Re-inspection / Evaluation

To Inspect Vehicle No: FBA 6091T Insured: GBH 9834K

at Workshop m/s OCCI_SONO MOTOR.COM Tel: _____

of 25 KAKI BUKIT ROAD 4 #01-38 SYNERGY SINGAPORE 417800

Policy No: _____ Claim No: _____

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 13/06/2019

(Client's Record)

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)**

Date/Time	Action/Instruction

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 _____ 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 _____