

Date 26.04.23

Fax:

Vehicle Reg No. **SHA7875X**

Date of Accident : 21.04.23

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

Signature : 

Name : JUMANI

Tel : 62148315

Fax : 65468156

Signature: _____

Name : **IRFAN**

Date : _____

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid		NO		
3. Survey Fees				
LTA Search Fee	26.75/2.00	YES		
5. Medical Fees (on behalf of driver, if applicable)				
6 Overrun				

Remarks: