| Serveyor: | mveyor: | | REF: CS/TPS23006095/Uvp3 | | | |
|----------------------|--|--------------------------------|--|--------------------------|--|--|
| | | L/SUM: 5,250 / REPAIR : 5 DAYS | | | | |
| From (Person):VICTO | | | ASSIGNMENT (Office) CTI Date/Time: 13/06/2023 | Third Parties: | / KEPAIK . 3 DATS | |
| Estimated Cost: | | .Bill | l to: | Claimant: | | |
| | _ | | | | CT AUTOMOBILE APPRAISAL | |
| OD TP Re-inspection | ion | | Workshop: LIU'S | | | |
| To Inspect Vehicle N | lo:_XD 42 | 78J | Insured: LMM 962380 | X Normanie P. Eld C | BROTTERAGTO | |
| at Workshop m/s | IU'S BRO | THER AU | TO Tel: 67411730 SUSA | | | |
| of 1 KAKI BUKI | Γ AVENUE | E 6 #01-01 | AUTOBAY @ KAKI BUKIT SING | | 3 | |
| Policy No: SNC230 | C200008 | | Claim No: A330305 | | | |
| Sum Insured: | | | Evener | Excess: | | |
| Make of Veh: | | | EXCess: | EXCESS | | |
| (Client's Record) | | | D.O.A. 19/04/2023 | | | |
| | | | | H.O.D. Endorsement/Date | , | |
| Date/Time: | | Person Con | tacted: Vehicle IN / OUT | Γ | • | |
| Date/Time: | Confir | med with | ,days (R | ed\$ / %.G | minimal I S | |
| Date/Time: | Submi | t Final Fig | ,days (Red \$ | %: Original | riginaldays) | |
| | n/Instruction | | | | _days) | |
| Date Time Actio | IVInstruction | | | | | |
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| | | | | | | |
| Para(1): Parts | found not | | (T) | | | |
| | TOURG HOL | replaced | (To highlight R or UB, I | R, Etc) | , and a second of the second o | |
| - | | | | | | |
| Para(2): Comp | nents on o | ongiata | 6.1 | | | |
| (2): Comm | ichts on C | ousistenc | y of damages (Parts Not Consist | tent: NC) | | |
| | | | | | | |
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| | | | | | | |
| Para(3): Nett V | Value | | | | | |
| | | | | | | |
| Mari | ket Value | : | Inspected/ | Fee Charged: | Date: | |
| 1 | | | F | Basic & Add Transport | | |
| Salv | age Value | ; | | Photos | | |
| Nett Value : | | | | Others | | |
| 1) Date/Time | | le Pass t- | | Total | | |
| | | | | | | |
| | | 10 F 455 10 | 4) Date/Time | File Return to | - | |
| 5) Date/Time | Fi | le Pass to | 6) Date/Time | File Return to | | |