ASS REC BY: | REF: CS/CTL18016806/GHb07 | Special Instruction:

Surveyor: GR
Mohmen

ASSIGNMENT (Office)

From (Person): Catharine Thia of CTL Date/Time: 14092018 954am

Estimated Cost: Bill to:

OD / (TP) / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No: SJE 41L Insured: SFU 7102L

at Workshop m/s Trans Eurokars Tel: 81289802

of 5 Ubi Close

Policy No: DMHCSH1745931700 Claim No: SHM18D04395C02.

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A. 09092018

CA / REV / REP. / REV 24 HRS 'WP' 18.09.2018 @ 430pm H.O.D. Endorsement:

Date/Time: 14092018 1027am Person Contacted: Jess Vehicle IN / (OUT)

Date/Time	Action/Instruction (✓) Estimate
	SJE 41L - x
	SFU 7102L - x
	Vehicle not sent in for repair
	Submit preli report