ASS. REC. BY: | REF: CITP8017008/Dc | Special Instruction:

Surveyor

ASSIGNMENT (Office)

From (Person): Chua Zhi Qian of Date/Time: 6/9/2018

Estimated Cost: Bill to:

~~OD / TP / WS /~~ **TP RES / OD RES / EVA / INV / MV / CS**

To Inspect Vehicle No: KJOA5841950 Insured:

at Workshop m/s Tel:

of

Policy No: Claim No: Honda Engine.

Sum Insured: Excess:

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

CA / REV / REP. / REV 24 HRS H.O.D. Endorsement:

Date/Time: Person Contacted: Vehicle IN / OUT

Date/Time	Action/Instruction ( ) Estimate