

ASS. REC. BY:

REF:

C/TP19002148/DC

Special Instruction:

Surveyor:

ASSIGNMENT (Office)

From (Person): Han Chee Kiong

of

RGRT3233

Date/Time: 23/1/2019

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: BIGA5205833

Insured:

at Workshop m/s

Tel:

of

Policy No:

Claim No:

BIGA5205833

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A.

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

Person Contacted:

Vehicle IN/OUT

Date/Time	Action/Instruction () Estimate

\$350