

ASS. REC. BY:

REF: CS/EOI/19003791/Usd3

Special Instruction:

MEMMEN

ASSIGNMENT (Office)

From (Person): Joel Goh

of EQI

Date/Time: 28/2/19 @ 2:11pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SKF 9503U

Insured:

at Workshop m/s SME MOTOR

Tel: 6747 6106

of 11kaki Bkt Ave 6 # 02-15 Autobuy

Policy No: DMPPH018-005228

Claim No: DM1940 00568

Sum Insured:

Excess: \$300.00 (50% waiver)

Make of Vch:

D.O.A. 26/2/19

(Client's Record)

CA If in order

REV / REP. / REV 24 HRS

01/03/2019

H.O.D. Endorsement:

Date/Time: 2:15pm @ 28/2/19

Person Contacted: pei ying

Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SKF 9503U-CC1/EQI 19003696/Njca3 D.O.A: 26/2/19
01/03/19	@ 14:20 p.m. revised PA to Joel Goh via memmen
01/03/19	@ 14:22 p.m. mandate requested authorize repair to Joel Goh via memmen.
01/03/19	@ 14:41 p.m. mandate approved by <del>MEMMEN</del> Joel Goh via memmen
05/03/19	@ 10:08 a.m. submit authorize repair to Jacob (operator) via email