ASS. REC. BY | REF: CS3/III19007584/Utd3-1 [e2] | Special Instruction:

Surveyor: Marcus / Mumen

ASSIGNMENT (Office)

From (Person): Stanley Lei of: III Date/Time: 1.7.2019

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SJU 8567A Insured: SHA 72434

at Workshop m/s: Power Autocare Tel: 8181 2212

of: 1 Kaki Bkt Rd 6 #02-11 Autobay

Policy No: MCOM0015 Claim No: MCT19040735

Sum Insured: Excess:

Make of Veh (Client's Record): D.O.A: 26/4/2019

CA / REV / REP. / REV M HRS H.Q.I. Endorsement

Date/Time: 9:36am @ 30/4/19 Person Contacted: Guny Vehicle: (IN) / OUT

Date/Time	Action/Instruction
	(✓) Estimate SJU 8567A-X SHA 72434 - CS/INE09005525/Yng! DOA 11/3/2019 After repair: 2/5/2019 1132am c/s 1400 edy.

Red ($1700) 55%

RECEIVED 04 JUL 2019

4/7- File pass to typist