ASS. REC. BY: | REP: CITP19020353/Dc | Special Instruction:

Surveyor

ASSIGNMENT (Office)

From (Person): of Rally Pitstop Date/Time: 4/11/2019

Estimated Cost: Bill to:

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

To Inspect Vehicle No: WBAJB32080WW06265 Insured:

at Workshop m/s Tel:

of

Policy No: Claim No: WBAJB32080WW06265

Sum Insured: Excess:

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

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

Date/Time Person Contacted: Vehicle IN/OUT

Date/Time	Action/Instruction ( ) Estimate