

ASS. REC. BY:

REF:

C1/TP19020354/DO

Special Instructions:

Surveyor

ASSIGNMENT (Office)

From (Person):

of Rally Bishop

Date/Time:

4/11/2019

Estimated Cost:

BID to:

Estimated Cost: _____
 OD+TP+WS+TP RES / OD RES / EVA / INV / MY / CS

To inspect Vehicle No: 7AMS857C001189661

Insured:

Tel:

at Workshop m/s

of

Policy No. _____

Claim No:

ZAMSS57C001129661

Excess:

Sum Insured:

D.O.A.

Make of Veh:
(Client's Record)

H.O.D. Endorsement:

CA / RBY / REP. / REV 24 HRS

Date/Time:

Person Contacted:

Vehicle IN/OUT

Date/Time

Action/Instruction ()	Estimate
1. <u>Identify the problem</u>	
2. <u>Generate possible solutions</u>	
3. <u>Evaluate the solutions</u>	
4. <u>Choose the best solution</u>	
5. <u>Implement the solution</u>	
6. <u>Evaluate the results</u>	

Estimate the