ASS. REC. BY: | REF: CI/TP19022636/Dq | Special Instruction:

Surveyor

ASSIGNMENT (Office)

From (Person): Ow Yeong Cheng Wen, Shermin of 81112523 Date/Time: 12/12/19

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SLK 2686H Insured:

at Workshop m/s Tel:

of

Policy No: Claim No: SLK 2686H

Sum Insured: Excess:

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

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

Date/Time Person Contacted: Vehicle IN / OUT

Date/Time	Action/Instruction ( ) Estimate
	350/-