

22/03/2002

ASS. REC. BY:

REF: CS/CT1200050421

f3

Special Instruction:

Surveilor:

ASSIGNMENT (Office)From (Person): Tan Kah Leng

of

CT1Date/Time: 7.4.20 11.39a.m

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLQ 4940D

Insured:

GBH 208x

at Workshop m/s

Automobil Integrated

Tel:

91198371

of

23 Kaki Bukit Ave 4 #04-01

Policy No:

DMCVEN1748581902

Claim No:

S/M20020166602

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 4/4/2020

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

4/4/2020 1.56p.m

Person Contacted:

Vehicle IN/OUT

Date/Time	Action/Instruction (☒) Estimate
	<u>SLQ 4940D - X</u>
	<u>GBH 208x - X</u>