

ASS. REC. BY:

REF: CI/TP20005342/Dq

Special Instruction:

Surveyor

ASSIGNMENT (Office)

From (Person): HONG HIN

of

Date/Time: 14/04/2020

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: WBAJA52090WC70644

Insured:

at Workshop m/s

Tel:

of

Policy No:

Claim No:

WBAJA52090WC70644

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
1. <u>Identify the problem</u>	
2. <u>Identify the data</u>	
3. <u>Identify the variables</u>	
4. <u>Identify the constraints</u>	
5. <u>Identify the objectives</u>	
6. <u>Identify the assumptions</u>	
7. <u>Identify the risks</u>	
8. <u>Identify the stakeholders</u>	
9. <u>Identify the resources</u>	
10. <u>Identify the timeline</u>	
11. <u>Identify the budget</u>	
12. <u>Identify the communication plan</u>	
13. <u>Identify the monitoring and evaluation plan</u>	
14. <u>Identify the reporting plan</u>	
15. <u>Identify the exit strategy</u>	

Estimate

\$350/-