ASS. REC. BY: | REF: CS4/ASM20005470/Dvf3 | Special Instruction:

Surveyor: Bryan

ASSIGNMENT (Office)

From (Person): Vale Oh of ASM Date/Time: 29/04/2020

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SKE 9898K Insured:

at Workshop m/s K KIM HIN AUTOMOTIVE PTE LTD Tel: 64527018

of 160 SIN MING DRIVE #02-20 SIN MING AUTO CITY

Policy No: Claim No: S0M02MH6

Sum Insured: Excess: $700.00

Make of Veh: (Client's Record) D.O.A 15/04/2020

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

Date/Time 29/04/2020 Person Contacted: SANDRA Vehicle IN / OUT

Date/Time	Action/Instruction ( ) Estimate
	No auth as Insured may want to claim against C & C on manufacture fault.
	Attn: Bryan Ang Survey and let us have your technical report in view of the fire dmg, tks