ASS. REC. BY: | REF: CS/CTI20005656/f3 | Special Instruction:

Surveyor:

## ASSIGNMENT (Office)

From (Person): PAULINE THAM of CTI Date/Time: 11/05/2020

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SJV 9983U Insured: GBJ 8350K

at Workshop m/s AUTOWORX HOUSE Tel: 6452 8211

of 176 SIN MING DRIVE #02-01

Policy No: DMCVSN30676419000 Claim No: SNM20D201889

Sum Insured: Excess:

Make of Veh: D.O.A 09/05/2020
(Client's Record)

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

Date/Time: 11/5 Person Contacted: MS LEE Vehicle IN / OUT

| Date/Time | Action/Instruction ( ✓ ) Estimate |
|---|---|
| | SJV 9983U - X |
| | GBJ 8350K - NA/CTI19019407/z4 DOA: 03/11/2019 |
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