

ASS. REC. BY:

REF: CS/CTI20006125/Etf3

Special Instruction:

Surveyor: STEVE

ASSIGNMENT (Office)

From (Person): Cecilia Low of CTI Date/Time: 3-6-20 5.32P.M

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: SJZ 2961H Insured: CB 7347H

at Workshop m/s Tony Automotive Pte Ltd Tel: 9735 6016

of 8 Kaki Bukit Ave 4 #04-07

Policy No: _____ Claim No: SNM20D202034

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 1-6-20
(Client's Record)

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

Date/Time: 3-6-20 5.47P.M Person Contacted: TONY Vehicle IN / OUT

Date/Time	Action/Instruction (<input checked="" type="checkbox"/>) Estimate
	SJZ 2961H - <input checked="" type="checkbox"/>
	CB 7347H - CC4/LCR18020867/Kdb3q2 DOA : 17/11/2018