

ASS. REC. BY:

REF: CS/MSG20006747/f3

Special Instruction:

Surveyor:

ASSIGNMENT (Office)From (Person): Fievel Foo of MSIG Date/Time: 29 Jun 2020 09:38

Estimated Cost: _____ Bill to: _____

OD ☒ TP WS/ TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SKV 8135X Insured: SKL 516Kat Workshop m/s MBM Wheelpower Pte Ltd Tel: 6262 8888of 160 Sin Ming Drive #06-02, Sin Ming AutoCityPolicy No: 29140064 Claim No: 625388

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 26/06/2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 29-6-20 10.40A.M Person Contacted: SHIRLEY Vehicle IN ☒ OUT

Date/Time	Action/Instruction (☒) Estimate
	SKV 8135X - ☒
	SKL 516K - ☒