

ASS. REC. BY:

REF: CS/AWA20009121/Gvf3

Special Instruction:

Surveyor: GQ

ASSIGNMENT (Office)

From (Person): MOTOR SURVEY of AWAC Date/Time: 28/8/2020 2:33 PM

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: FBL 8977S Insured: SLE 1570X

at Workshop m/s MCS AUTO Tel: 62969939

of NO. 1100 SERANGOON ROAD

Policy No: _____ Claim No: NSV2000130/PC

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 22/03/2020
(Client's Record)

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

Date/Time: 28-8-20 2.39P.M Person Contacted: STEPHANIE Vehicle: IN OUT

Date/Time	Action/Instruction (<input checked="" type="checkbox"/>) Estimate
	FBL 8977S- <input checked="" type="checkbox"/>
	SLE 1570X- CS/AWA20004606/Evd3e2 DOA :22/03/2020