

REF: CS3/SMO20010212/T1Utd3 Special Instruction:

ASS. REC. BY:

TAUFIKH

ASSIGNMENT (Office)

From (Person): GRACE TEO

SMO

Date/Time: 23/9/2020@11.49AM

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: FBQ 8701U

Insured: SKE 3545T

at Workshop m/s M1 MOTORING

Tel: 6743 7030

of 411 CHANGI ROAD

Policy No:

Claim No: CMTD2002644/THE

Sum Insured:

Excess:

Make of Veh:
(Client's Record

D.O.A 09/09/2020

CA / REV / REP. / REV 24 HRS 'WP'

H.O.D. Endorsement:

Date/Time: 12.15PM@23/9/2020 Person Contacted: XIAOU Vehicle: IN OUT

Date/Time	Action/Instruction (X) Estimate
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Date Time