ASS. REC. BY:

REF: CS/CTI20010240/d3

Special Instruction:

Surveyor

ASSIGNMENT (Office)

From (Person): ADELINE CHNG of CTI Date/Time: 24/9/2020@10.31AM

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SDV 1095G Insured: SJM 4941X

at Workshop m/s TAT HENG MOTOR Tel: 6483 7103/ 9113 5112

of 10 Ang Mo Kio Industrial Park 2A#02-09

Policy No: Claim No: SNM20D203445/SJM4941X/CHNGPW

Sum Insured: Excess:

Make of Veh: D.O.A. 20/09/2020
(Client's Record)

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

Date/Time: 10.34am@24/9/2020 Person Contacted: GINA - Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SDV 1095G