

ASS. REC. BY:

REF: CI/TPD20011138/Nq

Special Instruction:

Surveyor

ASSIGNMENT (Office)

From (Person): Kamaliah Kamis of \_\_\_\_\_ Date/Time: 28/09/2020

Estimated Cost: \_\_\_\_\_ Bill to: \_\_\_\_\_

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

To Inspect Vehicle No: FBJ 56M Insured: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_ Tel: \_\_\_\_\_

Policy No: MHASPF06000050769 Claim No: TP/IP/37543/2020

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

Make of Veh: \_\_\_\_\_ D.O.A. 01/09/2020  
(Client's Record)

CA / REV / REP. / REV 24 HRS

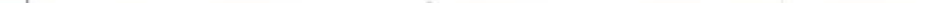
H.O.D. Endorsement: \_\_\_\_\_

Date/Time: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle IN/OUT \_\_\_\_\_

| Date/Time | Action/Instruction ( ) Estimate |
|-----------|---------------------------------|
|-----------|---------------------------------|

[illegible][illegible]

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0.450%

|  |         |
|--|---------|
|  | \$450/- |
|--|---------|

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