

12/17/2000

REF: CS/EGI20011216/d3

Special Instruction:

ASS. REC. BY:

ASSIGNMENT (Office)

Merimen

SURVBY

From (Person): PAULINE SOH of EGI Date/Time: 15/10/2020@6.11PM

Estimated Cost: Bill to:

OD TP WS / TP RES / OD RES / EVA / INV / MV / CS Insured: YP 4279G

To Inspect Vehicle No: SBS 6395Y Tel: 9199 0025

at Workshop m/s TOWER TRANSIT

of 21 BULIM DRIVE

Policy No: Claim No: CDMCG20001482

Sum Insured: Excess: D.O.A. 06/10/2020

Make of Veh: (Client's Record) H.O.D. Endorsement:

CA / REV / REP. / REV 24 HRS 'WP' Person Contacted: BAZLIN AHMAD

Date/Time 9.20AM@16/10/2020 Vehicle IN OUT

Date/Time	Action/Instruction (<input checked="" type="checkbox"/>) Estimate	DOA
	SBS 6395Y-NA/INC20002558/h4	13/02/2020
	YP 4279G-X	