22/03/2002

ASS. REC. BY: | REF: CS/EGI20011550/Kqf3 | Special Instruction:

Surveyor : KENNETH **ASSIGNMENT (Office)**

From (Person): PAULINE SOH of ERGO Date/Time: 23/10/2020 10:09 AM

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SHD 52J Insured: YN 7487M

at Workshop m/s TRANS-CAB Tel: 628 6666

of NO.2 ANG MO KIO ST 63 SINGAPORE 569111

Policy No: Claim No: CDMCG20001525

Sum Insured: Excess:

Make of Veh: "WP" D.O.A. 22.10.2020
(Client's Record)

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

Date/Time: 23-10-20 10.22A.M Person Contacted: CANDY Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SHD 52J- CC3/LPC20006044/Kba3s2 DOA :27/05/2020
	YN 7487M- X