

ASS. REC. BY:

REF: CS/DOI20011776/Bsf3

Special Instruction:

Surveyor: LIM

ASSIGNMENT (Office)

From (Person): Josephine Wong of UOI Date/Time: 27/10/2020 9:45 AM

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SLJ 3915X Insured: WB 9360T

at Workshop m/s Team Auto Pro Pte Ltd Tel: 62581955

of 160 Sin Ming Dr, #01-14 Singapore 575722

Policy No: Claim No:

Sum Insured: Excess:

Make of Veh: D.O.A. 24-10-2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement:

Date/Time: 27/10/2020 9:45 AM Person Contacted: PEACH Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (<input checked="" type="checkbox"/>) Estimate
	SLJ 3915X- <input checked="" type="checkbox"/>
	WB 9360T- <input checked="" type="checkbox"/>