22/03/2002

ASS. REC. BY: | REF: CS3/ASM20010893/R1sf3-1 | Special Instruction:

Surveyor: RASUL

**ASSIGNMENT (Office)**

From (Person): OH VALE of AXA Date/Time: 30-11-20

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SMR 6655Y Insured: FBK 5332C

at Workshop m/s Garage 13 Pte Ltd Tel: 63851171

of 8 kaki bukit ave 4 # 03-46 PREMIER

Policy No: Claim No: S0M02V6Z

Sum Insured: Excess:

Make of Veh: D.O.A. 07-10-20
(Client's Record)

"WP"

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

Date/Time: 09-10-20 11.03A.M Person Contacted: IRENE Vehicle IN / ~~OUT~~

| Date/Time | Action/Instruction ( X ) Estimate |
|---|---|
| | SMR 6655Y- X |
| | FBK 5332C- X |
| | |
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