

ASS. REC. BY:

REF: CS/MSG20013497/Ktf3

Special Instruction:

Surveyor: KennethASSIGNMENT (Office)From (Person): Jowyn Tay Mei Ling MSIG Date/Time: 08 Dec 2020 09:22

Estimated Cost: _____ Bill to: _____

OD-☒ TP-WS-TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SMG 5554U Insured: SLG 5655Zat Workshop m/s Munich Autocare Pte Ltd Tel: 9644 3110of 60 Jalan Lam Huat, #02-02/03 Carros CentrePolicy No: 29146780QMY Claim No: 631693

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 06/12/2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 08-12-20 10.44A.M Person Contacted: ANGELA Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	SMG 5554U- ☒
	SLG 5655Z- ☒