

ASS. REC. BY:

REF: CS/MSG20013818/f3

Special Instruction:

Surveyor:

ASSIGNMENT (Office)From (Person): CRYSTAL LEE of MSIG Date/Time: 15/12/2020 9:42 AM

Estimated Cost: _____ Bill to: _____

OD ☒ TP WS/ TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SLB 4590J Insured: FBN 600Xat Workshop m/s CHENG HOE Tel: 64812001of 10 ANG MO KIO IND PARK 2A #01-04 ANG MO KIO AUTOPOINT

Policy No: _____ Claim No: _____

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 09/12/2020
(Client's Record)

"WP"

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement: _____

Date/Time: 15-12-20 11.17A.M Person Contacted: Dorlyn Vehicle IN ☒ OUT

Date/Time	Action/Instruction (☒) Estimate
	SLB 4590J-X
	FBN 600X-X