ASS. REC. BY: | REF: CS/LPC20014074/Kqd3 | Special Instruction:

Surveyor KENNETH **ASSIGNMENT (Office)**

From (Person): GERALD POH of LPC Date/Time: 18/12/2020@10.23AM

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SLW 2745H Insured:

at Workshop m/s FALCON AIR-AUTO Tel: 6452 0880

of 176 SIN MING DRIVE# 01-06

Policy No: Claim No: 20/20/20/VP05/024018

Sum Insured: Excess: 0/-

Make of Veh: D.O.A. 16/12/2020
(Client's Record)

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

Date/Time: 10.51AM@18/12/20 Person Contacted: FLORENCE Vehicle IN / OUT

| Date/Time | Action/Instruction ( ✓ ) Estimate |
|---|---|
| | SLW 2745H-X |
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