ASS. REC. BY: | REF: CS/CTI20014700/d3 | Special Instruction:

Surveyor: Merimen

ASSIGNMENT (Office)

From (Person): JENNY LEW of CTI Date/Time: 2.59PM@29/12/2020

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SKX 5287A Insured:

at Workshop m/s AUTO INSURE Tel: 3157 2626

of 6 MARSILING LANE

Policy No: DMPCSNW00156322000 Claim No: SNM20D205060/C01/LEWLC

Sum Insured: Excess: TBA

Make of Veh: D.O.A. 21/12/2020
(Client's Record)

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

Date/Time: 3.25PM@29/12/2020 Person Contacted: GERALDINE Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SKX 5287A-CS/CTI20014548/R1qd3

Repairer agreed to survey on 30/12/2020

DOA : 21/12/2020