ASS. REC. BY:

REF: CS/TMI21000558/T1qd3

Special Instruction:

Surveyor TAUFIKH

ASSIGNMENT (Office)

Merimen

From (Person): JEFFREY TAY of TMI Date/Time: 2.10PM@12/01/2021

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SHB 3905P Insured: SMN 8304T

at Workshop m/s COMFORTDELGRO Tel: 6214 8300

of 59 LOYANG DRIVE

Policy No: ML000510 Claim No: M2100187

Sum Insured: Excess:

Make of Veh: D.O.A. 09/01/2021
(Client's Record)

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

Date/Time: 2.37PM@12/01/21 Person Contacted: MR.LIM Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SHB 3905P-CS3/FCI18014385/Gz4d3s2 DOA : 31/07/2018
	SMN 8304T-X