ASS. REC. BY:

REF: CS/CTI21000637/d3

Special Instruction:

Surveyor

ASSIGNMENT (Office)

From (Person): IRENE TAY of CTI Date/Time: 13/01/2021@4.01PM

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SMP 5011Y Insured: SGF 9312B

at Workshop m/s AUTOMOBILE HUB Tel: 9786 4483

of 1 KAKI BUKIT AVE 6# 02-11

Policy No: Claim No: SNM21D200176/C02/SGF9312B/TAYHP

Sum Insured: Excess:

Make of Veh: D.O.A. 06/01/2021
(Client's Record)

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

Date/Time: 13/01/2021@4.08PM Person Contacted: LIM CHEE SIONG Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate	
	SMP 5011Y-NA/CTI21000505/z4	DOA : 06/01/2021
	SGF 9312B-NA/CTI21000505/z4	DOA : 06/01/2021