

ASS. REC. BY:

SURVEYOR: GUO QIANG

ASSIGNMENT (Office)

18/01/2021

From (Person): THELMA CHOO of SMO

Date/Time:

30/9/2020@2:20pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SKK 3185S

Insured: SKZ 3502G

at Workshop m/s BLUWEL AUTOMOTIVE

Tel: 6745 2088

of 1 KAKI BUKIT AVE 6# 01-55 AUTOBAY

Policy No:

Claim No: CMTD2002855/THE

Sum Insured:

Excess:

D.O.A. 30/09/2020

Make of Veh:

(Client's Record)

CA / REV / REP. / REV 24 HRS 'WP'

H.O.D. Endorsement:

Date/Time: 2:57PM@30/9/2020

Person Contacted: SALLY

Vehicle: IN/OUT

Date/Time	Action/Instruction (X) Estimate
	SKK 3185S- X
	SKZ 3502G- X