22/03/2002

ASS. REC. BY: | REF: CS/INC21000883/f3 | Special Instruction:

Surveyor

ASSIGNMENT (Office)

From (Person): HAZALYSA BINTI IBRAHIM of INC Date/Time: 19/1/2021 8:48 AM

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SMN 9428M Insured: SLS 3756R

at Workshop m/s SW WERKZ PTE LTD Tel: 92712214

of BLK 25 KAKI BUKIT ROAD 4 #03-67/68 SYNERGY@ KAKI BUKIT

Policy No: Claim No: MT/1114496-002

Sum Insured: Excess:

Make of Veh: D.O.A. 20-12-20
(Client's Record)

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

H.O.D. Endorsement:

Date/Time: 19-01-21 9.02A.M Person Contacted: CHRIS Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SMN 9428M- ✗
	SLS 3756R- ✗