

ASS. REC. BY:

REF: CS/EQI21000911/T1qd3

Special Instruction:

SURVAYOR

ASSIGNMENT (Office)

From (Person): STEVE LIM

EQU

Date/Time: 19/01/2021@4.19PM

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: GBG 6015H

Insured: SKL 9164H

To Inspect Vehicle No: GBG 6015H

Tel: 9320 2773

at Workshop m/s

YEW KOON AUTO

BLK 3012 BEDOK IND.PARK E #01-2016/2048

Policy No:

Claim No: DM21HO000061 / JG

Sum Insured:

Excess:

D.O.A. 11/01/2021

Make of Veh:
(Client's Record

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

H.O.D. Endorsement:

Date/Time 4.38PM@19/01/21

Person Contacted: SANDY

Vehicle IN/OUT

Date Time

Action/Instruction	(✓)	Estimate
1. <u>Identify the problem</u>		
2. <u>Define the problem</u>		
3. <u>Generate possible solutions</u>		
4. <u>Evaluate the solutions</u>		
5. <u>Choose the best solution</u>		
6. <u>Implement the solution</u>		
7. <u>Evaluate the results</u>		

Estimate