

ASS. REC. BY:

REF: CS/CTI21000992/Qtd3

Special Instruction:

SUMMARY

'SUN PIN

ASSIGNMENT (Office)

Merimen

Merimén
From (Person):

ADELINE CHNG

of

CTJ

Date/Time: 21/01/2021@10.38AM

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

XE 2433K

Insured:

Tel: 6758 2222

at Workshop m/s

SC AUTO INDUSTRIES

of

51 SENOKO ROAD# 03-01

Policy No: DMCVSNW00109722000

Claim No: SNM21D200329/C01/CHNGPW

Sum Insured:

Excess: \$2000.00

D.O.A 11/01/2021

Make of Veh:

(Client's Record)

CA **REV** / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 10.55AM@21/01/21

Person Contacted: HAMIMAH

Vehicle ~~IN~~ OUT

DateTime

Action/Instruction (✓) Estimate

XE 2433K-X