ASS. REC. BY:

REF: CS/CTI21001131/Uqd3

Special Instruction:

Surveyor MARCUS

ASSIGNMENT (Office)

From (Person): ALFRED TOH of CTI Date/Time: 25/01/2021@10.05AM

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SLZ 277P Insured: XE 5935J

at Workshop m/s BIFROST AUTO Tel: 9329 0237

of 8 KAKI BUKIT AVE 4 # 01-49 PREMIER

Policy No: Claim No: SNM21D200344/C02/XE5935J/TOHHS

Sum Insured: Excess:

Make of Veh: D.O.A. 20/01/2021
(Client's Record)

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

Date/Time: 10.40AM@25/01/21 Person Contacted: IKHWAN Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SLZ 277P-X
	XE 5935J-X