22/03/2002

ASS. REC. BY: | REF: CS/CTI21001849/Kvf3 | Special Instruction:

Surveyor : KENNETH

ASSIGNMENT (Office)

From (Person): CECILIA LOW of CTI Date/Time: 01/02/2021

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SKX 7050C Insured:

at Workshop m/s Speed Clinic Tel:

of 10 ANG MO KIO IND. PARK 2A, #02-07 AMK AUTOPOINT, 568047 Ang Mo Kio

Policy No: DMPCSNW00061442000 Claim No: SNM21D200623

Sum Insured: Excess: $3000.00

Make of Veh: D.O.A. 01/02/2021
(Client's Record)

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

Date/Time: 08-021-21 5.03P.M Person Contacted: SAM Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SKX 7050C- ✗