

ASS. REC. BY:

REF: CS/SMO21002452/QUqf3

Special Instruction:

Surveyor: SUN PIN

ASSIGNMENT (Office)

From (Person): GRACE TEO of SMO Date/Time: 22/2/2021 10:06 AM

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: SLJ 1111L Insured: GBD 5017A

at Workshop m/s AUTO BULLOX PTE LTD Tel: 6844 4290

of 53 UBI AVENUE 1 #01-25 , PAYA UBI INDUSTRIAL PARK,S 408934

Policy No: _____ Claim No: CMTD2100562/AGC

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 19.02.21
(Client's Record)

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

Date/Time: 22-02-21 4.46P.M Person Contacted: ELMA Vehicle LOUT

| Date/Time | Action/Instruction (<input checked="" type="checkbox"/>) Estimate |
|-----------|---|
| | <u>SLJ 1111L -X</u> |
| | <u>GBD 5017A -X</u> |
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