

12/17/2000

REF: CS/MSG21002813/Dvd3

Special Instruction:

ASS. REC. BY:

SURV BY: BRYAN

ASSIGNMENT (Office)

Merimen From (Person): MUHD ASHIK B MAD

of MSIG

Date/Time: 02/03/2021@3.38PM

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SHD 6529L

Insured: SMA 706M

at Workshop m/s

BIFROST AUTO

Tel: 6243 6687

of

BLK 9 SECTOR C# 01-42

Policy No:

30001623288

Claim No:

254046

Sum Insured:

Excess:

Make of Veh:
(Client's Record)

D.O.A. 01/03/2021

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

H.O.D. Endorsement:

Date/Time: 4.10PM@02/03/21

Person Contacted: MS.LEE

Vehicle IN OUT

Date/Time	Action/Instruction (<input checked="" type="checkbox"/>) Estimate	DOA:
	SHD 6529L- NS/INC19004049/K1vd3e2	27/02/2019
	SMA 706M-X	