

ASS. REC. BY:

REF: CS/AGI21002992/f3

Special Instruction:

Surveyor:

ASSIGNMENT (Office)From (Person): IVY RATILLA of AGI Date/Time: 5/3/2021 5:19 PM

Estimated Cost: _____ Bill to: _____

OD: ☒ TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SFK 222Y Insured: SMP 6171Lat Workshop m/s MBM Wheelpower Pte Ltd Tel: 9328 8668of 160 Sin Ming Drive • #06-02 Sin Ming AutoCityPolicy No: _____ Claim No: C10009305/ST

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 04/03/2021
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 05-03-21 5.28P.MPerson Contacted: DANNYVehicle IN ☒ OUTDate/Time Action/Instruction (☒) Estimate

SFK 222Y- CS/CTI19018232/Eqf3s2 DOA :22/09/2019

SMP 6171L -X

09-03-2021 9.33A.M-Stanley email cancel survey request ,no survey done close our end.