

12/03/2021

REF: CS/MSG21003237/Uqd3

Special Instruction:

ASS. REC. BY:

SURVEY BY:

ASSIGNMENT (Office)

Merimen
From (Person):

KOH MING SHAO

of

MSIG

Date/Time: 11/03/2021@2.22PM

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SMV 8337G

Insured: SLZ 7443E

at Workshop m/s

NINETEEN AUTOWERKS

Tel: 9674 1991

of

BLK 15 KAKI BUKIT ROAD 4 # 01-53

Policy No: 30001621471

Claim No: 254540

Sum Insured:

Excess:

D.O.A. 11/03/2021

Make of Veh:
(Client's Record)

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

H.O.D. Endorsement:

Date/Time: 3.05PM@11/03/21

Person Contacted:

VESSIE

Vehicle ☒ IN/OUT

Date/Time	Action/Instruction (✓) Estimate
	SMV 8337G-X
	SLZ 7443E-X