

12/03/2021

REF: CS/MSG21003257/Kqd3

Special Instruction:

ASS. REC. BY:

SURVEYOR: KENNETH

ASSIGNMENT (Office)

From (Person): CRYSTAL LEE

of MSIG

Date/Time: 12/03/2021@9.11AM

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: GBD 5215U

Insured: GBA 9301T

at Workshop m/s

CHEW GOON MOTOR

Tel: 6484 1626

of BLK 10 AMK IND PARK 2A AVE 5# 01-15

Policy No: 1000941257

Claim No: 254550

Sum Insured:

Excess:

D.O.A. 09/03/2021

Make of Veh:  
(Client's Record)

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

H.O.D. Endorsement:

Date/Time: 9.35AM@12/03/21

Person Contacted: KELLY

Vehicle ☒ IN ☐ OUT

| Date/Time | Action/Instruction ( <input checked="" type="checkbox"/> ) Estimate |
|-----------|---------------------------------------------------------------------|
|           | GBD 5215U-X                                                         |
|           | GBA 9301T-X                                                         |
|           |                                                                     |
|           |                                                                     |
|           |                                                                     |
|           |                                                                     |
|           |                                                                     |