

12/17/2000

ASS. REC. BY:

REF: CS3/GAI21003411/Gtd3

Special Instruction:

Surveyor: GUO QIANG

ASSIGNMENT (Office)

From (Person): SHERY WONG

of GAI

Date/Time: 15/03/2021@10.53AM

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLC 7593B

Insured: GBE 5808D

at Workshop m/s

THE MECHANIC

Tel: 86600234

of 8 KAKI BUKIT AVE 4 # 02-47

Policy No:

Claim No: CLMOMVC000003978

Sum Insured:

Excess:

Make of Veh:  
(Client's Record)

D.O.A. 10/03/2021

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

H.O.D. Endorsement:

Date/Time: 11.13AM@15/03/21

Person Contacted: MS.BAO

Vehicle  IN /  OUT

Date/Time	Action/Instruction ( <input checked="" type="checkbox"/> ) Estimate
	SLC 7593B-X
	GBE 5808D-X