

12/02/2021

ASS. REC. BY:

REF: CS3/ASM21004206/Qqc

Special Instruction:

SURVIVOR:

ASSIGNMENT (Office)

From (Person): Dominic Yu of ASM Date/Time: 01/04/2021

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: SMK 8916T Insured: SHD 3175T

at Workshop m/s Bukit Timah Auto Tel: 6760 4262

of Blk 3 Woodlands Rd No. 391

Policy No: _____ Claim No: S1M036SJ

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 29/03/2021
(Client's Record)

CA / REV / REP. / REV 24 HRS 05.04.2021 2pm H.O.D. Endorsement: _____

Date/Time 01/04/21 Person Contacted: Mr Chia Vehicle IN OUT

Date/Time	Action/Instruction (X) Estimate
	SMK 8916T - X
	SHD 3175T - X