

ASS. REC. BY:

REF: CI/TP21012236/Dq

Special Instruction:

Surveyor:

ASSIGNMENT (Office)

From (Person): Mr Yee 9819 3420 of \_\_\_\_\_ Date/Time: 06/11/2021

Estimated Cost: \_\_\_\_\_ Bill to: \_\_\_\_\_

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

To Inspect Vehicle No: W1K2130802A866466 Insured: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_ Tel: \_\_\_\_\_

of \_\_\_\_\_

Policy No: \_\_\_\_\_ Claim No: W1K2130802A866466

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

Make of Veh: \_\_\_\_\_ D.O.A. \_\_\_\_\_  
(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement: \_\_\_\_\_

Date/Time: \_\_\_\_\_ Person Contacted: \_\_\_\_\_ Vehicle IN/OUT

Date/Time	Action/Instruction ( ) Estimate
	Contact owner Mr Yee at 9819 3420 or email Lanceyee@marvelmotor.com.sg
	\$350/-