

ASS. REC. BY:

REF: CS1/FCI22003982/Dea3e2

Special Instruction:

SURVIVOR

ASSIGNMENT (Office)

From (Person): VIC SANGHILAN

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MS-FCI

Date/Time: 14/04/2022

Estimated Cost:

Bill to:

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

EVA

INV / MV / CS

To Inspect Vehicle No:

TRD 2809L

Insured:

at Workshop m/s

Tel:

of

Policy No:

Claim No:

D17003685MFVS/EL

Sum Insured:

Excess:

Make of Veh:

D.O.A. 23/02/2017

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time

Person Contacted:

Vehicle IN/OUT

DateTime

Action/Instruction ()	Estimate
1. <u>Identify the problem</u>	
2. <u>Generate possible solutions</u>	
3. <u>Evaluate the solutions</u>	
4. <u>Select the best solution</u>	
5. <u>Implement the solution</u>	
6. <u>Evaluate the results</u>	

Estimate

TRD 2809L - X

TRD 2809L - X