

22/03/2021

ASS. REC. BY:

REF: CS/CTI20004421/Ktd3

Special Instruction:

Surveyor: KennethASSIGNMENT (Office)From (Person): Cecilia Low of CTI Date/Time: 1:13pm @ 24/3/2020

Estimated Cost: _____ Bill to: _____

OD (TP) / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SKW 7400G Insured: YP8602Eat Workshop m/s KAC Workshop Tel: 9321 0855of 14 AMK St. 63 Block BPolicy No: _____ Claim No: SNM20D201460/YP8602E/CECILIA

Sum Insured: _____ Excess: _____

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

CA / REV / REP. / REV 24 HRS

1up1

H.O.D. Endorsement: _____

Date/Time: 1:37pm @ 24/3/2020 Person Contacted: Koh Vehicle IN/OUT

Date/Time	Action/Instruction Estimate	
	SKW 7400G - NA/CTI20004340/h4	DOA: 21/03/2020
	YP 8602E - NA/CTI20004340/h4	DOA: 21/03/2020