

ASS. REC. BY:

REF: CS/CTI20005877/T1tf3

Special Instruction:

Surveyor: TAUFIKH ASSIGNMENT (Office)From (Person): IRENE TAY of CTI Date/Time: 21-5-20 4.53 P.M

Estimated Cost: _____ Bill to: _____

OD ☒ TP WS/ TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SLZ 1101G Insured: SMP 320Mat Workshop m/s VOLKSWAGEN Tel: 6305 7176of 247 Alexandra Road

Policy No: _____ Claim No: _____

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 20.5.2020
(Client's Record)

"WP"

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement: _____

Date/Time: 21-5-20 4.51P.M Person Contacted: CHARMAINE Vehicle IN ☒ OUT

Date/Time	Action/Instruction (☒) Estimate
	SLZ 1101G - ☒
	SMP 320M - CS/CTI20001931/Ktd3e2 DOA : 24/01/2020