

ASS. REC. BY:

REF: CS/SMO20006066/Kqf3

Special Instruction:

Surveyor: KENNTH ASSIGNMENT (Office)From (Person): GARCE TEO of SMO Date/Time: 1-6-20 5.29P.M

Estimated Cost: _____ Bill to: _____

OD ☒ TP WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SLJ 9396D Insured: SLC 6809Lat Workshop m/s KUM CHEW MOTOR WORKSHOP Tel: 64563715of 160 Sin Ming Drive #05-08 Sin Ming AutoCityPolicy No: _____ Claim No: CMTD2001695/THE

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 31/05/2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement: _____

Date/Time: 1-6-20 5.37P.M Person Contacted: MDM LIM Vehicle IN ☒ OUT

Date/Time	Action/Instruction (<input checked="" type="checkbox"/>) Estimate
	SLJ 9396D -
	SLC 6809L -
03/06/20@11.21am	revised to Thelma Choo by email.