

ASS. REC. BY:

REF: CS/SMO20006580/R1sf3

Special Instruction:

Surveyor: RASULASSIGNMENT (Office)From (Person): GRACE TEO of SMO Date/Time: 23/6/2020 2:43 PM

Estimated Cost: _____ Bill to: _____

OD ☒ TP WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SGE 8885B Insured: GBF 4015Bat Workshop m/s Mova Automotive Pte Ltd Tel: 6272 3892of BLK 1008 BUKIT MERAH LANE 3 #01-04/06/08Policy No: _____ Claim No: CMTD2001875

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 20/06/2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 23-6-20 2.59P.M Person Contacted: NITHA Vehicle IN ☒ OUT

Date/Time	Action/Instruction (☒) Estimate
	SGE 8885B - ☒
	GBF 4015B - ☒