

ASS. REC. BY:

REF: CS3/III20007109/R1vf3

Special Instruction:

Surveyor: RASULASSIGNMENT (Office)From (Person): Gabriel Wee of III Date/Time: 8/7/2020 8:58 AM

Estimated Cost: _____ Bill to: _____

OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SBS 8929U Insured: SHC 8154Bat Workshop m/s SBS TRANSIT Tel: 68678437of 28 Soon Lee Road, Singapore 628083Policy No: _____ Claim No: MCT20070057

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 05/07/2020
(Client's Record)

"WP"

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement: _____

Date/Time: 8-7-20 1.50P.M Person Contacted: GOH Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	SBS 8929U - ☒
	SHC 8154B - CS/III17014729/M1tbe2 DOA : 24/07/2017
20/7/20	Submit PRS