

ASS. REC. BY:

REF: CS3/LPC20007160/Qtf3

Special Instruction:

Surveyor: SUN PIN ASSIGNMENT (Office)From (Person): GERALD POH of LPC Date/Time: 9/7/2020 2:43 PM

Estimated Cost: _____ Bill to: _____

OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SJN 2504H Insured: SKG 2827Bat Workshop m/s INFINITY CAPITAL Tel: 88588851of 39 WOODLAND CLOSE #01-08Policy No: _____ Claim No: 19/20/20/VP05/023455

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 09.07.2020(Client's Record) "WP"

CA / REV / REP. / REV 24 HRS H.O.D. Endorsement: _____

Date/Time: 9-7-20 3.21P.M Person Contacted: ERIC Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	<u>SJN 2504H - ☒</u>
	<u>SKG 2827B - ☒</u>