

ASS. REC. BY:

REF: CS/CTI20007838/T1qf3

Special Instruction:

Surveyor: TAUFIKHASSIGNMENT (Office)From (Person): ALFRED TOH of CTI Date/Time: 29/7/2020 5:08 PM

Estimated Cost: _____ Bill to: _____

OD ☒ TP WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SKX 6866Y Insured: GBF 6339Dat Workshop m/s RICO 60 Tel: 9187 8064of 8 Kaki Bukit Avenue 4, Premier @ Kaki Bukit #02-24Policy No: DMCVSNA00000982000 Claim No: SNM20D202616C02/AT

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 28 JULY 2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 29-7-20 5.17P.M Person Contacted: Shanelle Lim Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	SKX 6866Y- X
	GBF 6339D-NA/CTI20007836/h4 DOA : 28/07/2020