

ASS. REC. BY:

REF: CS/AGI20007880/Uvf3

Special Instruction:

Surveyor: MARCUS ASSIGNMENT (Office)From (Person): Ivy Ratilla of AGI Date/Time: 30/7/2020 3:17 PM

Estimated Cost: _____ Bill to: _____

OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SLB 29R Insured: SGS 2364Dat Workshop m/s Team Motion Repairer: Automobile Integrated Tel: 91198371of 23 Kaki Bukit Avenue 4 (South Wing) #02-03BPolicy No: _____ Claim No: C10006852

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 28.07.2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 30-7-20 3.21P.M Person Contacted: JACYNE Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	SLB 29R - X
	SGS 2364D - X