

ASS. REC. BY:

REF: CS4/AGI20008175/Qqf3

Special Instruction:

Surveyor: SHERWIN/SUN PIN ASSIGNMENT (Office)From (Person): JULIE MANGUBAT of AGI Date/Time: 6/8/2020 6:52 PM

Estimated Cost: _____ Bill to: _____

☒ OD / TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SKZ 6102H Insured: _____at Workshop m/s Automotive Repair Centre Tel: 6468 8834of 38 Woodlands Industrial Park E1, #05-18Policy No: _____ Claim No: C10006910/JM

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 21-7-2020
(Client's Record)CA / ☒ REV / REP. / REV 24 HRSSurvey On 11-08-2020

H.O.D. Endorsement: _____

Date/Time: 7-8-20 10.13A.M Person Contacted: SHU JUAN Vehicle ☒ IN OUT

Date/Time	Action/Instruction (☒) Estimate
	SKZ 6102H- ☒