22/03/2002

ASS. REC. BY: | REF: CS/SMO20008191/Ksf3 | Special Instruction:

Surveyor: KENNETH **ASSIGNMENT (Office)**

From (Person): GRACE TEO of SMO Date/Time: 7/8/2020 3:30 PM

Estimated Cost: Bill to:

OD / ~~TP~~ / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No: SJU 1253B Insured: GY 4490C

at Workshop m/s Complete VMS Pte Ltd Tel: 6455 0012

of 176 Sin Ming Drive #03-14

Policy No: Claim No: CMTD2002308

Sum Insured: Excess:

Make of Veh: D.O.A. 06.08.20
(Client's Record)

"WP"

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

Date/Time: 7-8-20 3.34P.M Person Contacted: CHEW Vehicle: IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SJU 1253B- ✗
	GY 4490C- CA/AIG09017833/w1 DOA : 08/08/2009