

ASS. REC. BY:

REF: CS/CTI20008275/Utf3

Special Instruction:

Surveyor: MARCUS ASSIGNMENT (Office)From (Person): PAULINE THAM of CTI Date/Time: 11/8/2020 5:01 PM

Estimated Cost: _____ Bill to: _____

OD ☒ TT / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SMH 9940G Insured: SMH 9940Gat Workshop m/s H S Automotives Pte. Ltd. Tel: 6538 1368of Blk 2 Kaki Bukit Avenue 2 #01-15 Kaki Bukit AutoHubPolicy No: _____ Claim No: SNM20D202785

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 7-8-2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 11-8-20 5.10P.M Person Contacted: MR SIM Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	SMH 9940G- NA/CTI20008210/h4 DOA :07/08/2020
	SMH 9940G- NA/CTI20008210/h4 DOA :07/08/2020