

ASS. REC. BY:

REF: CS/III20008359/Uvf3

Special Instruction:

Surveyor: MARCUS ASSIGNMENT (Office)From (Person): Gabriel Wee of III Date/Time: 13/8/2020 8:32 AM

Estimated Cost: _____ Bill to: _____

☒ OD TP WS TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SLW 3009T Insured: _____at Workshop m/s Hup Motor Trading & Service Tel: 9815 4655of Blk 9004 Tampines St 93#01-120

Policy No: _____ Claim No: _____

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 12/08/2020
(Client's Record)CA / ☒ REV / REP. / REV 24 HRS H.O.D. Endorsement: _____Date/Time: 13-8-20 9.40A.M Person Contacted: DAVID Vehicle ☒ IN OUT

Date/Time	Action/Instruction (☒) Estimate
	SLW 3009T- X
13/8/20	Seek mandate via merimen
17/8/20	Rece <u>approved</u> from Sundari, excess \$1000 via merimen
17/8/20	Informed David C/A excess \$1000 via merimen