

ASS. REC. BY:

REF: CS3/SMO20008377/GKqf3

Special Instruction:

PRS

Surveyor: GQASSIGNMENT (Office)From (Person): GRACE TEO of SMO Date/Time: 12/8/2020 4:50 PM

Estimated Cost: _____ Bill to: _____

OD: ☒ TP WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SMC 8312C Insured: YN 633Dat Workshop m/s TEAMAUTOPRO Tel: 62581955of 160 Sin Ming Dr, #01-14Policy No: _____ Claim No: CMTD2002356/GPL

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 12.08.20
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 13-8-20 11.19A.M Person Contacted: PEACH Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	SMC 8312C- CC4/AIG20007723/Bea3 DOA : 26/07/2020
	YN 633D- ☒