

ASS. REC. BY:

REF: CS/CTI20008666/Gsf3

Special Instruction:

Surveyor: GQ ASSIGNMENT (Office)

From (Person): ALFRED TOH of CTI Date/Time: 19/8/2020 10:18 AM

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: SKJ 5713K Insured: SKS 93B

at Workshop m/s BIFROST Tel: 93290237

of 8 Kaki Bukit Ave 4 #01-49, Premier @ Kaki Bukit

Policy No: _____ Claim No: SNM20D202853C02/3

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 07/08/2020
(Client's Record)

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

Date/Time: 19-8-20 10.30A.M Person Contacted: IKHWAN Vehicle IN OUT

Date/Time	Action/Instruction (<input checked="" type="checkbox"/>) Estimate
	SKJ 5713K- NA/INC20008205/h4 DOA :07/08/2020
	SKS 93B- NA/INC20008205/h4 DOA :07/08/2020