22/03/2002

ASS. REC. BY: | REF: CS/CTI20008931/Atf3 | Special Instruction:

Surveyor : ADRIAN **ASSIGNMENT (Office)**

From (Person): JENNY LEW of CTI Date/Time: 25/8/2020 9:09 AM

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SGQ 717T Insured: SMR 167D

at Workshop m/s PREMIUM Tel: 6768 9911

of 55 Ubi Road 1

Policy No: DMHCSNA00000381900 Claim No: SNM20D203019

Sum Insured: Excess:

Make of Veh: D.O.A. 23/08/2020
(Client's Record)

"WP"

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

Date/Time: 25-8-20 9.56A.M Person Contacted: SYAFIQ Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SGQ 717T- X
	SMR 167D- X