

ASS. REC. BY:

REF: CS3/FCI20009003/Eqf3

Special Instruction:

Surveyor: STEVE ASSIGNMENT (Office)From (Person): WOO JUN KIATERIC of FCI Date/Time: 25/8/2020 5:47 PM

Estimated Cost: _____ Bill to: _____

OD ☒ / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SGM 3867U Insured: SHC 0059Xat Workshop m/s GARAGE 13 Tel: 63851171of 8 Kaki Bukit Ave 4 #04-07 Premier@KB Singapore 415875Policy No: _____ Claim No: D20003356MFSH

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 21-8-2020
(Client's Record)

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

Date/Time: 26-8-20 9.56A.M Person Contacted: IRENE Vehicle ☒ IN/OUT

Date/Time	Action/Instruction (☒) Estimate
	SGM 3867U- NA/MSG20008921/z4 DOA :21/08/2020
	SHC 0059X- ☒