

ASS. REC. BY:

REF: CS/MSG20009200/AGyf3

Special Instruction:

Surveyor: ADRIANASSIGNMENT (Office)From (Person): CHHIA NYUK PIN

of

MSIGDate/Time: 31 Aug 2020 15:00

Estimated Cost: _____

Bill to: _____

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

To Inspect Vehicle No: _____

SMH 3527G

Insured: _____

GBE 1733L

at Workshop m/s _____

Sin Yu Sin Workshop

Tel: _____

9199 3103of 1 Kaki Bukit Ave 6 #01-52 (Auto Bay @ Kaki Bukit)Policy No: A28816883MKC

Claim No: _____

628019

Sum Insured: _____

Excess: _____

Make of Veh: _____

(Client's Record)

D.O.A. 28/08/2020

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 31-8-20 3.49P.M

Person Contacted: _____

WEI LEANGVehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	SMH 3527G- ☒
	GBE 1733L- ☒