

ASS. REC. BY:

REF: CS/INC20009253/Uqf3

Special Instruction:

Surveyor: MARCUSASSIGNMENT (Office)From (Person): HAZALYSA BTE IBRAHIM of INC Date/Time: 1/9/2020 11:00 AM

Estimated Cost: _____ Bill to: _____

OD: ☒ IP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SMM 4832S Insured: SLU 186Uat Workshop m/s Tony Automotive Pte Ltd Tel: 97356016of 8 Kaki Bukit Ave 4 #04-07 Premier@KBPolicy No: _____ Claim No: MT/1101525-002

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 28-8-2020
(Client's Record)

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

Date/Time: 1-9-20 12.01P.M Person Contacted: TONY Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	SMM 4832S- ☒
	SLU 186U- ☒