

ASS. REC. BY:

REF: CS/TMI20009634/T1yf3

Special Instruction:

Surveyor: TAUFIKH ASSIGNMENT (Office)From (Person): DILLEN SENTHILAN of TMI Date/Time: 09 Sep 2020 10:27

Estimated Cost: _____ Bill to: _____

OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SHD 7087M Insured: GBH 3057Bat Workshop m/s COMFORTDELGRO Tel: 6214 8300of 59 Loyang DrivePolicy No: ML000245 Claim No: M2004405

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 07/09/2020
(Client's Record)

CA / REV / REP. / REV 24 HRS "WP"

H.O.D. Endorsement: _____

Date/Time: 09-09-20 10.39A.M Person Contacted: JUMANI Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	SHD 7087M - NBA/INC19001985/Y DOA :29/01/2019
	GBH 3057B- X