

ASS. REC. BY:

REF:CS/TMI20009844/T1qf3

Special Instruction:

Surveyor: TAUFIKH ASSIGNMENT (Office)From (Person): Ong Chin Kiat of TMI Date/Time: 14 Sep 2020 19:11

Estimated Cost: _____ Bill to: _____

OD-☒ TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SHA 4692B Insured: PA 6117Mat Workshop m/s COMFORTDELGRO Tel: 6214 8300of 59 Loyang DrivePolicy No: ME000569 Claim No: M2004475

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 10/09/2020
(Client's Record)

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

Date/Time: 15-09-20 9.09A.M Person Contacted: JUMANI Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	SHA 4692B- CC4/III19003842/R1eb3q2 DOA :27/02/2019
	PA 6117M- NJA/RSI10006740/j1 DOA : 06/04/2010