

ASS. REC. BY:

REF: CS/CTI20009918/Qvf3

Special Instruction:

Surveyor: SUN PIN ASSIGNMENT (Office)

From (Person): Pauline Tham of CTI Date/Time: 16/9/2020 9:14 AM

Estimated Cost: _____ Bill to: _____

OD IP WS TP RES OD RES EVA INV MV CS

To Inspect Vehicle No: SMC 2819Y Insured: SML 7655Y

at Workshop m/s MY CAR CONSULTANT Tel: 88668832

of 60 JALAN LAM HUAT #05-68

Policy No: _____ Claim No: SNM20D203352

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 13-09-200

(Client's Record) "WP"

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

Date/Time: 16-9-20 10.40A.M Person Contacted: HUI QIN Vehicle IN OUT

Date/Time	Action/Instruction (<input checked="" type="checkbox"/>) Estimate
	SMC 2819Y- <input checked="" type="checkbox"/>
	SML 7655Y- <input checked="" type="checkbox"/>
21/9/20	Email preli revised to Pauline
26/10/20	LS \$3850 confirmed by email (Red 13,800, 78%)