

ASS. REC. BY:

REF: CS/CTI20011409/T1vf3

Special Instruction:

Surveyor: TAUFIKHASSIGNMENT (Office)From (Person): Irene Tay Hui Ping of CTI Date/Time: 21 Oct 2020 07:37

Estimated Cost: _____ Bill to: _____

OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SLV 3948M Insured: SLV 7779Hat Workshop m/s Inchape Centre Tel: 9336 6875 / 6631 1864of 2 PANDAN CRESCENT, LEVEL 4 BODYCARE CENTRE, 128462 West CoastPolicy No: _____ Claim No: SNM20D203899C02

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 16/10/2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 21-10-20 9.38 A.M Person Contacted: SHASHI Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	SLV 3948M- ☒
	SLV 7779H- NA/CTI20011255/h4 DOA :16/10/2020
22/10/20	Send IA via merimen
3/11/20	Final fig \$16,759.90 confirmed by email (Red 6914.30, 29%)