

ASS. REC. BY:

REF: CS/ICS20011667/Uqf3

Special Instruction:

Surveyor: MARCUSASSIGNMENT (Office)From (Person): Crystabelle Tan of ECICS Date/Time: 27/10/2020 1:35 PM

Estimated Cost: _____ Bill to: _____

OD-IP-WS/TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SGJ 4732J Insured: SKE 9731Hat Workshop m/s NPH AUTO SERVICE Tel: 67840663of BLK 9005 TAMPINES STREET 93 #01-246/254 SINGAPORE 528839Policy No: _____ Claim No: DMPC2000180H/02/CT

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 23/10/2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

"EWP"

H.O.D. Endorsement: _____

Date/Time: 27-10-20 1.9P.MPerson Contacted: PEGGYVehicle IN OUT

Date/Time	Action/Instruction (☒) Estimate
	SKE 9731H- ☒
	SGJ 4732J- ☒