

ASS. REC. BY:

REF: CS/CTI20012020/Ayf3

Special Instruction:

Surveyor: ADRIAN ASSIGNMENT (Office)From (Person): ALFRED TOH of CTI Date/Time: 3/11/2020 10:29 PM

Estimated Cost: _____ Bill to: _____

OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SCV 204C Insured: PC 8097Mat Workshop m/s RICO 60 Tel: 6286 6060of 8 Kaki Bukit Avenue 4, Premier @ Kaki Bukit #02-24Policy No: _____ Claim No: SNM20D204155

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 29/10/2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 4-11-20 8.50A.M Person Contacted: SHANNELLE Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	SCV 204C- CC3/AIG17018865/T1eb3q2 DOA:01/10/2017
	PC 8097M- ☒