

ASS. REC. BY:

REF: CS/GAI20012115/Uqf3

Special Instruction:

Surveyor: MARCUS ASSIGNMENT (Office)From (Person): SHERY WONG of GAI Date/Time: 5/11/2020 1:51 PM

Estimated Cost: _____ Bill to: _____

OD-☒TP/WS/TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SFL 34T Insured: GBE 633Zat Workshop m/s Progressive Car Care Pte Ltd Tel: 6741 5336of Blk 3022A Ubi Road 1 01-45/46Policy No: _____ Claim No: CLMOMVC000003911

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 31.10.2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 05-11-20 1.55P.M Person Contacted: PEI WEN Vehicle IN ☒ OUT

Date/Time	Action/Instruction (☒) Estimate
	SFL 34T- X
	GBE 633Z- CS/CTI19007907/Asd3n2 DOA :06/05/2019