

ASS. REC. BY:

REF: CS/AGI20012251/Aqf3

Special Instruction:

Surveyor: ADRIANASSIGNMENT (Office)From (Person): IVY RATILLA of AGI Date/Time: 9/11/2020 2:46 PM

Estimated Cost: _____ Bill to: _____

OD ☒ TP WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SKE 2486L Insured: SKC 1343Hat Workshop m/s Kang Car Repairers Pte Ltd Tel: 6747 7636of NO.1 KAKI BUKIT AVE 6 #02-06 AUTOBAY @ KAKI BUKITPolicy No: _____ Claim No: C10007908/ST

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 06.11.2020
(Client's Record)

CA / REV / REP. / REV 24 HRS "WP"

H.O.D. Endorsement: _____

Date/Time: 09-11-20 3.12P.M Person Contacted: SHARON Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	<u>SKE 2486L-X</u>
	<u>SKC 1343H-X</u>