

ASS. REC. BY:

REF: CS/CTI20012390/Kvf3

Special Instruction:

Surveyor: KENNETH ASSIGNMENT (Office)From (Person): JENNY LEW of CTI Date/Time: 11/11/2020 5:03 PM

Estimated Cost: _____ Bill to: _____

OD ☒ TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SGH 3929B Insured: SJM 7202Bat Workshop m/s Chew Goon Motor Tel: 6484 1626of Blk 10, Ang Mo Kio Ind Park 2A, Ave 5 #01-15, 16 & 17,Policy No: DMHCSNA00003502000 Claim No: SNM20D204321/C02/LEWLC

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 11.09.2020
(Client's Record)

"WP"

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement: _____

Date/Time: 11-11-20 5.35P.M Person Contacted: KELLY Vehicle ☒ IN/OUT

Date/Time	Action/Instruction (☒) Estimate
	SGH 3929B- CS/MSG19018566/Htf3e2 DOA :18/10/2019
	SJM 7202B- X
13/11/20	Send IA via merimen
27/11/20	Kenneth confirmed LS \$2800 (Red 5236.29, 65%)