

ASS. REC. BY:

REF: CS/CTI20012401/Aqf3

Special Instruction:

Surveyor: ADRIANASSIGNMENT (Office)From (Person): LIONEL CHUA of CTI Date/Time: 12/11/2020 10:05 AM

Estimated Cost: _____ Bill to: _____

OD ☒ TP WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SGS 5402H Insured: GBH 564Zat Workshop m/s iShare Auto Pte. Ltd. Tel: 6341 6789of 8 Kaki Bukit Avenue 4 #08-09 Premier @ Kaki BukitPolicy No: DMCVSNA00075272000 Claim No: SNM20D204324C02

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 10.11.2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 12-11-20 10.09A.MPerson Contacted: MICHELLE Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	SGS 5402H- ☒
	GBH 564Z- ☒