

ASS. REC. BY:

REF: CS/CTI20013046/Atf3

Special Instruction:

Surveyor: ADRIANASSIGNMENT (Office)From (Person): ALFRED TOH of CTI Date/Time: 26/11/2020 9:23 AM

Estimated Cost: _____ Bill to: _____

OD-☒ TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SLP 2120Y Insured: GBF 5791Lat Workshop m/s Sin Yu Sin Workshop Tel: 9199 3103of 1 Kaki Bukit Avenue 6 #01-52 AutobayPolicy No: _____ Claim No: SNM20D204557

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 23-11-20
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 26-11-20 11.23A.M Person Contacted: Wei Leang Vehicle ☒ IN/OUT

Date/Time	Action/Instruction (☒) Estimate
	SLP 2120Y- ☒
	GBF 5791L- ☒