22/03/2002

ASS. REC. BY: | REF: CS/CTI20013109/Atf3 | Special Instruction:

Surveyor : ADRIAN **ASSIGNMENT (Office)**

From (Person): JENNY LEW of CTI Date/Time: 27/11/2020 11:50 AM

Estimated Cost: Bill to:

OD / ~~TP~~ / ~~WS~~ / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No: SMN 4804T Insured: GZ 6829S

at Workshop m/s CAS Garage Pte. Ltd. Tel: 9791 6119

of 1 Kaki Bukit Ave 6 #02-22/21/20

Policy No: Claim No: SNM20D204601

Sum Insured: Excess:

Make of Veh: D.O.A. 26.11.2020
(Client's Record)

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

H.O.D. Endorsement:

Date/Time: 27-11-20 1.27P.M Person Contacted: NICOLE Vehicle: IN / ~~OUT~~

Date/Time	Action/Instruction (✓) Estimate
	SMN 4804T- NA/CTI20013096/z4 DOA :26/11/2020
	GZ 6829S- NA/CTI20013096/z4 DOA : 26/11/2020