

12/12/2000

ASS. REC. BY:

REF: CS/CTI20013123/Uqd3

Special Instruction:

SURVEY BY:

ASSIGNMENT (Office)

From (Person): ALFRED TOH

of CTI

Date/Time: 27/11/2020@4.18PM

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SJT 5247Z

Insured: SKT 8993X

at Workshop m/s

TEAMWORK GARAGE

Tel: 6844 2475

of

53 UBI AVENUE 1# 01-24

Policy No:

Claim No: SNM20D204602/C02

Sum Insured:

Excess:

D.O.A. 25/11/2020

Make of Veh:

(Client's Record)

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

H.O.D. Endorsement:

Date/Time: 4.39PM@27/11/2020

Person Contacted:

DARREN

Vehicle ☒ IN / OUT

Date/Time	Action/Instruction (☒) Estimate	Repairer agreed to survey on 30/11/2020
	SJT 5247Z-X	
	SKT 8993X-X	