

ASS. REC. BY:

REF: CS/MSG20013394/Dvf3

Special Instruction:

Surveyor: BRYAN ASSIGNMENT (Office)From (Person): CRYSTAL LEE of MSIG Date/Time: 4/12/2020 4:17 PM

Estimated Cost: _____ Bill to: _____

OD-☒ TP WS/ TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SMU 4108H Insured: SLM 1606Kat Workshop m/s JWG INTERNATIONAL PTE. LTD Tel: 8498 0038of 10, Ang Mo Kio Ind Park 2A #03-08 AMK AutoPointPolicy No: 29141713MKF Claim No: 631654

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 04/12/2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 04-12-20 5.16P.M Person Contacted: CYNTHIA Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	SMU 4108H- ☒
	SLM 1606K- ☒
19/1/21	Send IA via merimen