

ASS. REC. BY:

REF: CS/CTI20013849/Kqf3

Special Instruction:

Surveyor: KENNETHASSIGNMENT (Office)From (Person): Irene Tay of CTI Date/Time: 15/12/2020 3:03 PM

Estimated Cost: _____ Bill to: _____

OD ☒ TP WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SMR 4877L Insured: GX 3831Pat Workshop m/s MBM Wheelpower Pte Ltd Tel: 8686 5188of 160 Sin Ming Drive #06-02Policy No: _____ Claim No: SNM20D204687C02

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 03/12/2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 15-12-20 3.07P.M Person Contacted: SHIRLEY Vehicle IN ☒ OUT

Date/Time	Action/Instruction (☒) Estimate
	SMR 4877L - ☒
	GX 3831P - ☒