

ASS. REC. BY:

REF: CS3/SMO20013920/GUvf3

Special Instruction:

Surveyor: GQ ASSIGNMENT (Office)From (Person): GRACE TEO of SMO Date/Time: 16/12/2020 11:41 AM

Estimated Cost: _____ Bill to: _____

OD ☒ TP WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SMR 5138E Insured: SMA 928YPat Workshop m/s BIFROST Tel: 93290237of 8 KAKI BUKIT AVENUE 4 #01-49 PREMIER @ KAKI BUKITPolicy No: _____ Claim No: CMTD2003664/THE

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 13/12/2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 16-12-20 11.48A.M Person Contacted: IKHWAN Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	SMR 5138E- ☒
	SMA 928YP- ☒