

ASS. REC. BY:

REF: CS/CTI21000656/R1vf3

Special Instruction:

Surveyor: RASULASSIGNMENT (Office)From (Person): ADELIEN CHNG of CTI Date/Time: 13 Jan 2021 16:35

Estimated Cost: _____ Bill to: _____

OD ☒ TP WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SKN 5588J Insured: GBD 7272Rat Workshop m/s PERFORMANCE Tel: 63190172/63190174of 303 ALEXANDRA ROADPolicy No: DMCVSNW00017852005Claim No: SNM21D200185

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 11/01/2021
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 13-01-2021 5.51P.MPerson Contacted: CAROLINE Vehicle IN/OUT

Date/Time	Action/Instruction (☒) Estimate
	SKN 5588J- ☒
	GBD 7272R- ☒