

ASS. REC. BY:

REF: CS3/FCI21000729/Gvf3

Special Instruction:

Surveyor: GQASSIGNMENT (Office)From (Person): RACHEL WU of FCI Date/Time: 15/1/2021 10:16 AM

Estimated Cost: _____ Bill to: _____

OD ☒ TP WS/ TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: FU 7158B Insured: SHA 5318Bat Workshop m/s TOH MOTOR ENTERPRISE Tel: 97919594of 160 Sin Ming Drive #05-16, Sin MINGPolicy No: _____ Claim No: D2100030MFSH

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 26-12-2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 15-01-2021 11.49A.MPerson Contacted: TOH Vehicle IN ☒ OUT

Date/Time	Action/Instruction (☒) Estimate
	FU 7158B- NA/INC19000543/k4 DOA :04/11/2018
	SHA 5318B- CC4/AIG20009958/T1ra3 DOA :16/09/2020
25/1/21	Submit PRS, MV: \$1800