

ASS. REC. BY:

REF: CS/CTI21000733/Uvf3

Special Instruction:

Surveyor: MARCUSASSIGNMENT (Office)From (Person): PAULINE THAM of CTI Date/Time: 15/1/2021 11:31 AM

Estimated Cost: _____ Bill to: _____

OD ☒ TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: FBR 6168S Insured: SMA 6338Cat Workshop m/s TEO SPRAY PAINTING Tel: 6283 5474of BLK 6 DEFU LANE 10 DEFU IND PARK C #01-558Policy No: _____ Claim No: SNM21D200137

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 07-01-2021
(Client's Record)

CA / REV / REP. / REV 24 HRS "WP" H.O.D. Endorsement: _____

Date/Time: 15-01-2021 12.47P.M Person Contacted: IRENE Vehicle ☒ IN/OUT

Date/Time	Action/Instruction (☒) Estimate
	FBR 6168S- ☒
	SMA 6338C- CS/FCI19000770/Kvd3n2 DOA :09/01/2019