

ASS. REC. BY:

REF:CS/CTI21000828/Avf3

Special Instruction:

Surveyor: ADRIAN ASSIGNMENT (Office)From (Person): ALFRED TOH of CTI Date/Time: 18/1/2021 4:37 PM

Estimated Cost: _____ Bill to: _____

OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SMC 8618X Insured: GBJ 4696Pat Workshop m/s BIFROST Tel: 93290237of 8 Kaki Bukit Ave 4 #01-49, Premier @ Kaki BukitPolicy No: _____ Claim No: SNM21D200270

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 13/01/2021
(Client's Record)

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

Date/Time: 18-01-21 4.38P.M Person Contacted: IKHWAN Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	SMC 8618X- ☒
	GBJ 4696P- NA/CTI21000675/h4 DOA :13/01/2021